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## ORIGINAL PAPERS

### THE THERAPEUTIC EFFECT OF INEXACT INTERPRETATION: A CONTRIBUTION TO THE THEORY OF SUGGESTION

BY  
EDWARD GLOVER

LONDON

Psycho-analytic interest in theories of cure is naturally directed for the most part to the curative processes occurring in analytic treatment: the therapeutic effect of other methods is, nowadays at any rate, more a matter of general psychological interest. In earlier times, of course, it was necessary to pay special attention to the theoretical significance of non-analytic psychotherapy. Statements were frequently banded about that psycho-analysis was nothing more than camouflaged suggestion: moreover, the fact that analytic method was based on experiences derived from situations of rapport between physician and patient, as for example, in hypnosis, made some theoretical differentiation desirable. Most discussions of the 'resolution of transference' can be regarded as contributions to this problem, affording a rough but serviceable distinction between analytic and other therapeutic methods. And the special studies of Freud (1) on group psychology, Ferenczi (2) on transference, Ernest Jones (3) on suggestion and auto-suggestion, Abraham (4) on Couéism and an unfinished study by Radó (5) on the processes of cure, have given a broader theoretical basis to this differentiation.

Nevertheless we are periodically stimulated to reconsider the relations between different forms of psychotherapy, more particularly when any advance is made in analytic knowledge. When such advances occur we are bound to ask ourselves, 'what happened to our cases before we were in a position to turn this fresh knowledge to





advantage ? ' Admittedly we would not be under this obligation had we not previously used terms such as 'cure', 'thorough analysis', etc., etc. But for many years now we have been in the habit of speaking in such terms and therefore cannot avoid this periodic searching of heart.

One possible answer is that the additional information does not affect therapeutic procedure at all ; that, like M. Jourdain, we have been talking 'prose' all the time. This certainly applies to a great deal of recent work on super-ego analysis, anxiety and guilt. It is true we have been able to sub-divide resistances into super-ego resistances, ego resistances and id resistance. But we always endeavoured to reduce such resistances, even when we had no special labels to attach to them. On the other hand when we consider the actual content of repression, it is clear that the discovery of fresh phantasy systems sets us a problem in the theory of healing. It might be stated as follows : what is the effect of inexact as compared with apparently exact interpretation ? If we agree that accuracy of interpretation amongst other factors contributes towards a cure, and if we agree that fresh phantasy systems are discovered from time to time, what are we to make of the cures that were effected before these systems were discovered ?

An obvious difficulty in dealing with this problem is the fact that we have no adequate and binding definitions of terms. Take for example standards of 'cure' : it may be that the standards have varied : that in former times the criterion was more exclusively a symptomatic one : that as our knowledge has increased our standards of cure have become higher or broader or more exacting. For example the application of analysis to character processes has certainly increased the stringency of therapeutic standards : whether it has given rise to fantastic criteria remains to be seen. In any case it is generally agreed that a distinction between analytic and non-analytic therapeutic processes cannot be solely or immediately established by reference to symptomatic changes.

Then as to the significance of phantasy systems, it might be suggested that presentation content is not in itself primarily pathogenic : that the history of the affect only is important in illness, hence that the value of fresh discoveries of phantasy content lies solely in providing more convenient or rapid access to affective reactions. The objection to this view is that it leaves the door open to complete interpretative distortion or glossing over of repressed content ; more-



over it would deprive us of a valuable distinction between psycho-analytical interpretation and pseudo-analytical suggestion.

Incidentally a somewhat cynical view would hint that fresh discoveries are not necessarily or invariably accurate, or indeed fresh. One is bound to recall here the rapidity with which some analysts were able to discover 'birth traumas' in all their patients for some time after Rank first published his book on the *Trauma of Birth*, and before it was officially exploded. A less cynical view is that many new phantasy systems or elaborations of known systems are mainly repetitive in nature; repeating some central interest in varying idiom, the idiom being determined by stages of libido development and ego reaction. According to this view repetitions assist displacement and are therefore protective: the greater the number of systems we discover the more effectively we can prevent defensive displacement. We could then say that in the old days affective disturbances were worked through under a handicap (viz.: lack of knowledge of the variations of phantasy), but that they were nevertheless worked out.

The next view has some resemblances to the last but brings us closer to an *impasse*. It is that pathogenic disturbances are bound by fixation and repression to certain specific systems, but that these can be lightened by regression (displacement backwards) to earlier non-specific systems (*Rückphantasieren*) or again by distribution, i.e. forward displacement to later and more complicated systems of phantasy. Even then we could say that legitimate cures were effected in former times although under a handicap. But if anyone cared to claim that particular neuroses were defences against a specific set of unconscious phantasies, related to a specific stage of fixation and that unless these were directly released from repression no complete cure could be expected, we would be compelled to consider very carefully how cure came about in the days before these phantasies were discovered.

Obviously if such a claim were made, the first step in investigation would be to estimate the part played in previous cures by repression. This is always the unknown quantity in analyses. It does not require any close consideration to see that the rapid disappearance of symptoms which one occasionally observes in the opening phase of an analysis (e.g. in the first two or three months) is due partly to transference factors, but in the main to an increase in the effectiveness of repression. This efficiency reaches its height at one of two points; first when the amount of free anxiety or guilt has been reduced, and second when the



transference neurosis threatens to bring out deep anxiety or guilt together with their covering layer of repressed hate. One is apt to forget, however, that the same factors can operate in a more unobtrusive way and take effect at a much later date in analysis. In this case the gradual disturbance of deep guilt is undoubtedly the exciting cause of increased repression. According to this view cures effected in the absence of knowledge of specific phantasy systems would be due to a general redressing of the balance of conflict by true analytic means, bringing in its train increased effectiveness of repression.

If we accept this view we can afford to neglect the practical significance of inexact interpretations. It will be agreed of course that in the hypothetical case we are considering, many of the interpretations would be inexact in that they did not uncover the specific phantasy system, although they might have uncovered systems of a related type with some symbolic content in common. Nevertheless, we are scarcely justified in neglecting the theoretical significance of inexact interpretations. After all, if we remember that neuroses are spontaneous attempts at self-healing, it seems probable that the mental apparatus turns at any rate some inexact interpretations to advantage, in the sense of substitution products. If we study the element of displacement as illustrated in phobias and obsessions, we are justified in describing the state of affairs by saying that the patient unconsciously formulates and consciously lives up to an inexact interpretation of the source of anxiety. It seems plausible, therefore, that another factor is operative in the cure of cases where specific phantasy systems are unknown; viz. that the patient seizes upon the inexact interpretation and converts it into a displacement-substitute. This substitute is not by any means so glaringly inappropriate as the one he has chosen himself during symptom formation and yet sufficiently remote from the real source of anxiety to assist in fixing charges that have in any case been considerably reduced by other and more accurate analytic work. It used to be said that inexact interpretations do not matter very much, that if they do no good at any rate they do no great damage, that they glide harmlessly off the patient's mind. In a narrow symptomatic sense there is a good deal of truth in this, but in the broader analytic sense it does not seem a justifiable assumption. It is probable that there is a type of inexact interpretation which, depending on an optimum degree of psychic remoteness from the true source of anxiety, may bring about improvement in the symptomatic sense at the cost of refractoriness to deeper analysis. A glaringly inaccurate interpretation



is probably without effect unless backed by strong transference authority, but a slightly inexact interpretation may increase our difficulties. Some confirmation of this can be obtained by studying the spontaneous interpretations offered us by patients. These are often extremely accurate in reference to *some* aspect of their phantasy activity, more particularly when the interpretation is truly intuitive, i.e. is not stimulated by intellectual understanding or previous analytic experience. But it will be found that except in psychotic cases, the interpretation offered is not at the moment the true interpretation. Test this by appearing to acquiesce in the patient's view and in nine out of ten cases of neurosis the patient will proceed to treat you with the indifference born of relief from immediate anxiety. The moral is of course that, unless one is sure of one's ground, it is better to remain silent.

The subject is one that could be expanded indefinitely, but I will conclude its purely analytic aspect here by giving a brief illustration. If we recall the familiar intrauterine phantasies which have been variously interpreted from being indications of birth traumas to being representations of pre-latency genital incest-wishes; or the phantasies of attacking the father or his penis in the mother's womb or vagina to which special attention was drawn by Abraham; or again the more 'abdominal' womb phantasies to which Melanie Klein has attached a specific meaning and significance, it will be seen that we have ample material to illustrate the problem under discussion. I would add only one comment by way of valuation. It is that in the absence of definite evidence indicating specific fixation at some stage or another the more universally such phantasies are found, the greater difficulty we have in establishing their value in any one case. In other words the greater difficulty we have in establishing the neurotic option. In terms of a recent discussion (6) of precipitating factors in neurosis, we cannot speak of a specific qualitative factor in a precipitation series of events until by the uncovering of repression we have proved not only that the same factor existed in the predisposing series, but also that it was pathogenic.

\* \* \*

Before leaving this aspect of the subject, and in order to prevent misunderstanding, it would be well to establish some distinction between an 'inexact' and an 'incomplete' interpretation. It is obvious that in the course of uncovering a deep layer of repressed phantasy, a great number of preliminary interpretations are made, in



many cases indeed cannot be avoided. To take a simple example : it is common experience that in the analysis of unconscious homosexual phantasies built up on an anal organisation, much preliminary work has to be done at a genital level of phantasy. Even when genital anxieties are relieved and some headway has been made with the more primitive organization, patients can be observed to reanimate their genital anxieties periodically. The anal system has for the moment become too strongly charged. In such a case the preliminary interpretations of genital phantasy would be perfectly accurate and legitimate, but in the pathogenic sense incomplete and indirect. If, however, no attempt were made to uncover anal phantasies and if genital phantasies alone were interpreted, the interpretation would be inexact. If subsequently in the course of analysing anal phantasies, genital systems were re-cathected, and a genital interpretation alone were given, such an interpretation would be not only incomplete but inexact.

A similar situation arises with sadistic components of an anal-sadistic system. Preliminary interpretation of the anal component would be incomplete : it would not be inexact unless the sadistic element were permanently neglected. This particular example is worthy of careful consideration : it brings out another point in the comparison of analytic results obtained in recent times with those obtained in earlier years. In the analysis of obsessional neuroses it can be observed that when sadistic components are causing resistance, the resistance frequently takes the form of an exaggeration of seemingly erotic phantasy and ceremonial. And the patient is only too glad to accept an interpretation in terms of libidinal phantasy. The same applies to the defence of erotic components by a layer of sadistic phantasy. Now the whole trend of modern psycho-analytic therapy is in the direction of interpreting sadistic systems and guilt reactions. We are bound, therefore, to consider whether some of the earlier symptomatic successes were not due to the fact that by putting the stress on libidinal factors and only slightly on sadistic factors, the patient was freed from anxiety but left with unresolved (repressed) sadistic systems. It would be interesting to compare the earlier results of analysis of transference and narcissistic neuroses respectively with those obtained in recent times. If the view I have presented is valid, one would expect to find that in former times the results in the narcissistic neuroses were comparatively barren, and the symptomatic results in the transference neurosis more rapid and dramatic. As against this one would expect to find better results from the modern



treatment of narcissistic neuroses and less rapid (if ultimately more radical) results in the transference neuroses. The deep examination of guilt layers might be expected to postpone alleviation in cases where the maladaptation lay more patently in the libidinal organization.<sup>1</sup>

One more comment on 'incomplete' interpretation. Apart from the degree of thoroughness in uncovering phantasy, an interpretation is never complete until the immediate defensive reactions following on the interpretation are subjected to investigation. The same applies to an interpretation in terms of 'guilt' or 'anxiety': the latter is incomplete until the phantasy system associated with the particular affect is traced. The tracing process may lead one through a transference repetition to the infantile nucleus or through the infantile nucleus to a transference repetition (7).

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Turning now to the non-analytical aspect of the problem, there are one or two points worthy of consideration. The psycho-analyst has never called in question the symptomatic alleviation that can be produced by suggestive methods either of the simple transference type or of the pseudo-analytical type, i.e. suggestions based on some degree of interpretative appreciation. He has of course queried the permanence of results or speculated as to the price paid for them in general happiness or adaptability or emotional freedom. But he could not very well question the occurrence of such alleviations; in his own

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<sup>1</sup> If a companion paper were written 'on the exacerbating effect of inexact interpretation', it would doubtless be concerned mainly with the result of partial interpretation of sadistic phantasy. A common result of disturbing guilt systems without adequate interpretation is that the patient breaks off in a negative transference. Even if his anxiety symptoms have disappeared he may depart with increased inferiority feeling, a sure sign of activated guilt. Short of this dramatic termination, there are many other indications of active resistance following inexact interpretation. During the discussion of this paper, Miss Searl drew attention to a common source of resistance or stagnation during analysis. It is the interpretation of an Id system in terms of a super-ego system or *vice versa*. This observation is certainly sound. It can be demonstrated experimentally with ease during the analysis of obsessional cases. In the early stages of ceremonial formation the protective or cancelling ('undoing') system is dictated by the super-ego. Sooner or later this is infiltrated with repressed libidinal and sadistic (Id) elements. Continuance of the 'Super-ego' interpretation is then 'inexact' and if persisted in brings the analysis to a standstill.



consultative practice the analyst has many occasions of observing the therapeutic benefit derived from one or more interviews. Even in this brief space he is able to observe the same factors at work which have been described above. Patients get better after consultation either because they have relieved themselves of trigger charges of anxiety and guilt, or because they have been frightened off unconsciously by the possibility of being analysed or because in the course of consultation the physician has made some fairly accurate explanations which are nevertheless sufficiently inexact to meet the patient's need.

Strictly speaking this observation is not an analytical one, but taken in conjunction with the earlier discussion of the effect of inexact interpretation in actual analysis, it seems to justify some reconsideration of current theory of suggestion. One is tempted to short-circuit the process by stating outright that whatever psychotherapeutic process is not purely analytical must, in the long run, have something in common with the processes of symptom formation. Unless we analyse the content of the mind and uncover the mental mechanisms dealing with this content together with its appropriate affect, we automatically range ourselves on the side of mental defence. When therefore an individual's mental defence mechanisms have weakened and he goes to a non-analytical psychotherapist to have his symptoms (i.e. subsidiary defences) treated, the physician is bound to follow some procedure calculated to supplement the secondary defence (or symptomatic) system. He must employ a tertiary defence system.

Theoretical considerations apart, it would seem reasonable to commence by scrutinizing the actual technique employed in suggestion. This can be done most conveniently by using a common standard of assessment, to wit, the amount of psychological truth disclosed to the patient. Or, to reverse the standard, suggestive procedure can be classified in accordance with the amount of deflection from psychological truth, or by the means adopted to deflect attention.

Using these standards it would no doubt be possible to produce an elaborate sub-division of methods, but there is no great advantage to be obtained by so doing. It will be sufficient for our purpose to contrast a few types of suggestive procedure, using analytical objectivity as the common measure. The most extreme form of deviation from objectivity is not generally regarded as a suggestive method at all. Yet there is no doubt that it belongs to suggestive procedure and produces very definite results. It is the method of 'neglect' combined with 'counter-stimulation' employed by the general practitioner or



consultant (8). The psychological truth is not even brushed aside ; it is completely ignored. Nevertheless, stimulated no doubt by intuitive understanding of counter-irritations and attractions, the practitioner recommends his patient to embark on activities outside his customary routine. He advises a change of place (holiday) or of bodily habit (recreation, sport, etc.) or of mental activity (light reading, music-hall, etc.). The tendencies here are quite patent. The physician unwittingly tries to reinforce the mechanism of repression (neglect) and quite definitely invokes a system of counter-charge, or anticathexis. His advice to go for a holiday or play golf or attend concerts is therefore an incitement to substitute (symptom) formation. And on the whole it is a symptom of the obsessional type. The patient must do or think something new (obsessional ceremonial or thought), or take up some counter attraction (anticathexis, cancellation, undoing, expiation). This counter-charge system no doubt contributes to the success of the general manœuvre but the repression element is important. The physician encourages the patient by demonstrating his own capacity for repression. He says in effect, ' You see, I am blind ; I don't know what is the matter with you : go and be likewise '.

The next group, though officially recognized, does not differ very greatly from the unofficial type. It includes the formal methods of suggestion or hypnotic suggestion. Here again the tendency is in complete opposition to the analytical truth ; but the repression aspect is not so strongly represented. The suggestionist admits that he knows something of his patient's condition but either commands or begs the patient to neglect it (auxiliary to repression). The patient can and will get better, is in fact better and so on. To make up for the inherent weakness of the auxiliary system, the suggestionist goes through various procedures (suggestions or recommendations) that are again of an obsessional type. Interest has to be transferred to ' something else ' more or less antithetical in nature to the pathogenic interest ; and of course in hypnotic procedure there are always remainders of magical systems (gestures and phrases).

A third group is distinguished by the fact that a certain amount of use is made of psychological truth or analytic understanding. Explanations varying in detail and accuracy are put before the patient or expounded to him. This is followed by direct or indirect suggestion. By exhortation or persuasion or implication the patient is led to believe that he is now or ought now to be relieved of his symptoms. Auxiliary suggestions of an antithetical type may or may not be added. Although



varying in detail, all these procedures can be included under one heading, viz. : pseudo-analytical suggestion. And as a matter of fact, although the view has aroused much resentment, analysts have made so bold as to describe all pseudo-Freudian analysis as essentially pseudo-analytic suggestion. The only difference they can see is that no open suggestive recommendations are made in the second or third stage of the procedure. As however the negative transference is not analysed at all, and very little of the positive, a state of rapport exists which avoids the necessity for open recommendation. Despite this, and presumably to make assurance doubly sure, a good deal of oblique ethical or moral or rationalistic influence is exerted.

There is one feature in common to all these methods ; they are all backed by strong transference authority, which means that by sharing the guilt with the suggestionist and by borrowing strength from the suggestionist's super-ego, a new substitution product is accepted by the patient's ego. The new ' therapeutic symptom construction ' has become, for the time, ego-syntonic.<sup>2</sup>

At this point the critic of psycho-analysis who for reasons of his own is anxious to prove that psycho-analysis is itself only another form of suggestion, may argue as follows : if in former times analysts did not completely uncover unconscious content, then surely the analytic successes of earlier days must have been due in part to an element of suggestion in the affective sense as distinct from the verbal sense. It may be remembered that the old accusation levelled against psycho-analysis was that analytic interpretations were disguised suggestions of the ' verbal ' or ideoplastic order. At the risk of being tedious the following points must be made clear. Analysis has always sought to resolve as completely as possible the affective analytic bond, both positive and negative. It has always pushed its interpretations to the existing maximum of objective understanding. It is certainly possible that the factor of repression (always an unknown quantity) has dealt with psychic constructions that were incompletely interpreted, but analysis has always striven its utmost to loosen the bonds of repression. It is equally possible that when interpretation has been incomplete some displacement systems are left to function as substitutes or anticathexes ; nevertheless analysis has always endeavoured to head

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<sup>2</sup> I have omitted here any detailed description of the dynamic and topographic changes involved in the processes of suggestion. These have been exhaustively described by Ernest Jones in the papers already quoted.



off all known protective displacements. In short, it has never sought to maintain a transference as an ultimate therapeutic agent ; it has never offered less than the known psychological truth ; it has never sided with the mechanisms of repression, displacement or rationalisation. Having made its own position clear, psycho-analysis offers no counter-attack to the criticism. It offers instead a theory of suggestion. It is prepared to agree that the criticism might be valid for bad analysis or faulty analysis or pseudo-analysis. It adds, however, that bad analysis may conceivably be good suggestion, although in certain instances it has some misgivings even on this point. For example, it has always been poor analysis to stir up repressed sadistic content and then, without analysing the guilt reactions fully, to remove the props of displacement. And it has probably always been good suggestion to offer new or reinforced displacement substitutes and to buttress what tendencies to withdraw cathexis are capable of conscious support. It is conceivably bad suggestion or more accurately bad pseudo-analytic suggestion to disturb deep layers of guilt. Presumably a good deal of the success of ethical suggestion and side-tracking is due not only to the fact that the patient's sadistic reactions are given an extra coating of rationalization, but to the fact that the sidetracking activities recommended act as obsessional 'cancellings' of unconscious sadistic formations.<sup>3</sup>

In addition to these two factors of repression and substitution there is a third fundamental factor to be considered. A great deal of information has now been collected from various analytical sources to show that at bottom mental function is and continues to be valued in terms of concrete experience. There has of course always been some academic interest in the relation of perceptual to conceptual systems, but the contributions of psycho-analysis to this subject have been so detailed and original that it is for all practical purposes a psycho-analytical preserve. For the unconscious a thought is a substance, a word is a deed, a deed is a thought. The complicated variations which psycho-analysis has discovered within this general system depend on the fact that in the upper layers of the unconscious (if we may use this loose topographical term) the substance is regarded as having different origin, properties and qualities. Put systematically,

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<sup>3</sup> In a personal communication Mrs. Riviere has emphasized the importance of sadistic factors in any assessment of analytic or suggestive method.



the nature of the substance depends upon the system of libidinal and aggressive interest in vogue during the formation of the particular layer of psychic organization.

During the primacy of oral interest and aggression, all the world's a breast and all that's in it good or bad milk. During the predominance of excretory interest and anal mental organization, all the world's a belly. During infantile genital phases, the world at one time is a genital cloaca, at another a phallus. The overlappings and interdependence of these main systems give rise to the multiplicity and variety of phantasy formations. One element is however common to all phases, and therefore is represented in all variations of phantasy. This is the element of aggression direct or inverted. So all the substances in the world are benign or malignant, creative or destructive, good or bad.

Psycho-analysts have shown over and over again that, given the slightest relaxation of mental vigilance, the mind is openly spoken of as a bodily organ. The mind is the mouth; talk is urine or flatus, an idea is fertile and procreative. Our patients are 'big with thought' and tell us so when off guard. This has been demonstrated with considerable detail in the analysis of transference phantasies. An interpretation is welcomed or resented (feared) as a phallus. Analysts are reproached for speaking and for keeping silent. Their comments are hailed as sadistic attacks; their silences as periods of relentless deprivation. In short, analysis is unconsciously regarded as the old situation of the infant in or *versus* the world. An interpretation is a substance, good or bad milk, good or bad fæces or urine (or baby, or phallus). It is the supreme parent's substance, friendly or hostile; or it is the infant's substance, returning in a friendly or malignant form, after a friendly or hostile sojourn in the world.

As I have pointed out elsewhere (9) this innate tendency of the mind is a perpetual stumbling block to objectivity not only on the patient's part but on the part of the analyst. It must be constantly measured and allowed for in all stages of analysis. This measurement and uncovering is the essence of transference interpretation. In both transference and projection forms it plays a large part in the fear of analysis which is universally observed. Only the other day a patient with intuitive understanding of symbolism, but without any direct or indirect orientation in analytic procedure expressed the following views during the first stage of analysis: words are really urine and the stream of urine is an attacking instrument: associations may be either unfriendly or friendly urine: interpretation is generally friendly urine,



except on days when erotic and sadistic phantasies are important : when the associations are bad the urine is bad ; when the interpretation is bad the analyst is putting bad urine into the patient : the patient must get it out or as the case may be the analyst must take it out. Prognostically speaking the situation in this case was not very good, but the material was entirely spontaneous.

As has been remarked this innate tendency of the mind is a perpetual stumbling block to analysis. But what is a stumbling block to analysis may be a keystone to suggestion. At any rate part of a key structure. From the earliest times some appreciation of the significance of ' substance ' has crept into theories of suggestion ; it is to be seen in the old belief in a ' magnetic fluid ' and in the quite modern ' implantation ' theories of Bernheim and others (ideoplasty). And it seems plausible that these, in their time apparently scientific explanations, are remote derivatives from a more primitive ' concrete ' ideology such as is to be studied in the animistic systems of primitives, the delusional systems of paranoiacs and (given analytical investigation) the transference systems of neurotics. Janet, it will be remembered, regarded the ' somnambulistic passion ' or craving as comparable with the craving of drug addicts ; and Ernest Jones (3) has pointed out the relation of this to psycho-analytic ideas concerning the significance of alcohol (Abraham). Discredited or inadequate theories of suggestion thus come into their own in an unexpected fashion. They give us one more hint of the nature of hypnotic and suggestive rapport. And they give us some hint of the therapeutic limits of pseudo-analytic suggestion. The essential substance, symbolized by words or other medium of communication, must be a friendly curative substance. It must be capable of filling a dangerous space in the patient's body-mind, it must be able to expel gently the dangerous substances in the patient's body-mind, or at the least it must be able to neutralize them. In the process of neutralizing guilt, it must not awaken anxiety. The hysteric, for example, must not be made psychically pregnant in the course of psychic laparotomy. So the pseudo-analytical suggestionist does well to alleviate anxieties before administering his suggestive opiate for guilt. And he should steer clear of analysing sadism. The general practitioner sets him a good example in his unofficial and unwitting system of suggestion (8). As we have seen the latter not only weighs in on the side of repression and inculcates policies of obsessional anticathexis, but he caters for the patient's fundamental core of paranoia. He doesn't know what is wrong with his patient's mind but



he knows, or thinks he knows, what is wrong with his patient's intestinal system. And he uses cathartic drugs or gentle laxatives to drive out the poison, following them up with friendly tonics and invigorating hæmatinics. In this way he deals with the paranoid and dangerous omnipotence systems of his patient, without bringing the mind into the matter at all. The suggestionist who openly endeavours to deal with mind through mind should remember that in the last resort he must base his suggestive interferences on a system of 'friendly paranoia'. Here again the difference between suggestion and true analysis becomes apparent. Analysis must at all times uncover this deepest mental system: the suggestionist with an eye on his patient's anxiety reactions must invariably exploit it.

*Conclusion.*—There are many other factors in the operation of suggestion, concerning which analysis has had or will have much to say. But for the present purpose it is unnecessary to go into greater detail. Examination of the effect of inexact interpretation in analysis focusses our attention on the possibility that what is for us an incomplete interpretation is for the patient a suitable displacement. By virtue of the fact that the analyst has given the interpretation, it can operate as an ego-syntonic displacement system (substitution-product, symptom). Applying this to the study of methods of suggestion, we see that suggestion technique varies in accordance with the emphasis placed on various defensive mechanisms. All methods depend on the mechanism of repression, but as regards auxiliaries to repression there are quite definite variations in method. In general, non-analytical types of suggestion, by virtue of their complete opposition to the psychological truth and the stress they put on modifications of conduct and thought, might be regarded as 'obsessional systems of suggestion'. Pseudo-analytical types, although nearer the truth, are yet sufficiently remote to operate by focussing energy on a displacement, and in this respect might be called 'hysterical suggestions of a phobic order'. But the most original and in a sense daring technician, who seldom gets credit for being an expert in suggestion, is the general practitioner or consultant. Intuitively he attempts to deal at once with the patient's superficial anxiety layers and his deepest guilt layers. He is unwittingly a pure 'hysterical suggestionist' in the sense that he plumps for repression and tacitly offers his own repressions (ignorance) as a model; but by his use of drugs he shows intuitive appreciation of the deeper cores of guilt which, under other circumstances, give rise to paranoia. And he plays the rôle of the 'friendly persecutor'. He is



in this respect the lineal descendant of the first magical pharmacologists.

These conclusions do not pretend to be original. It has long been held that hypnotic manifestations represent an induced hysteria, and similar suggestions have been made by Radó (5) for the abreaction phenomena of catharsis. Abraham (4) considered that states of auto-suggestion were induced obsessional systems and of course the induction or development of a transference 'neurosis' during analysis is regarded as an integral part of the process. Current types of pseudo-analytical suggestion have not received the same amount of attention. And since they are being employed more and more frequently in psychotherapeutic circles, it is high time to give them some more definite status. In the sense of displacement, the system they endeavour to exploit is a phobia system. For the treatment to be successful, the patient must develop an ego-syntonic phobia. One might regard this form of suggestion as a kind of homeopathy. The suggestionist plays the patient at his own game of symptom formation.

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## SPECIFIC FORMS OF THE ŒDIPUS COMPLEX <sup>1</sup>

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The 'Œdipus complex' is the term used by Freud to denote the medley of strivings, feelings and unconscious ideas grouped round the individual's wishes to possess sexually the parent of the opposite sex and to get rid of the parent of the same sex. When we speak of the 'complete Œdipus complex' we imply the co-existence of the converse situation, in which the parent of the same sex is desired sexually, while the parent of the opposite sex is the one whose removal is wished for. Anyone who has come to recognize the fundamental importance of the Œdipus complex, whether through discovery in himself or others, or because he accepts the statements of psycho-analysts without being more deeply conversant with psycho-analysis, will find that there are two problems—or perhaps it would be more correct to say two apparent problems—which demand a solution.

In the first place he will say: 'I now understand that this Œdipus complex is to be regarded as the "nuclear complex" in neurosis. If, unconsciously, a man's sole love-object is his mother, he will see her in every woman he meets and therefore he will have to repress his sexuality; the return of the repressed sexuality constitutes neurosis. And if, unconsciously, a man desires to kill his father, he will scent parricide in every action and this will inhibit his initiative; the return of this drive, again, is neurosis. But how are we to reconcile these facts with the statement that the Œdipus complex is *normal* and that its presence in every individual is as much a matter of course as, for example, his nose?'

And secondly: 'It was precisely psycho-analysis, as opposed to schematic medicine, which proclaimed that the personal destiny of each one of us is entirely individual and unique and that the causes of neurosis are forgotten experiences, traumas, which the person in question has at some time actually lived through. The task of recovering these facts in the patient's personal history is what makes psycho-analysis necessarily so long a process. This was all quite comprehensible. But now we are told that the Œdipus complex is the nuclear

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complex of the neuroses. All neurotics at bottom suffer from the same unconscious constellation, which we know of beforehand. Why then should we not inform the patient of it, as soon as he has got far enough to listen and understand? What is the object of delving into his history in analysis?'

I said that both these problems were only apparent problems. They are easily solved, and yet the whole purpose of this paper is to comment on this self-evident solution.

Let us take the first question. The Œdipus complex is not normal in the way in which the nose is normal. Rather it is like the thymus gland, i.e. it is normal at a certain period but abnormal if it persists unchanged beyond that period. Everybody has it between the ages of about four and six; later, in normal people, it seems to vanish. We see then that neurosis, regarded as a diseased Œdipus complex, is an *inhibition of development*, the persistence of an early phase of development. For *the adult neurotic has retained his Œdipus complex*. He knows nothing about it, but nevertheless we can show it to be operative, and this is what we mean when we say it is 'unconscious'. But all this cannot after all be quite correct. It will be objected that Freud has told us that the analysis of the works of poets or the dreams of normal people shows that the Œdipus complex is still active in these adult persons, who are not neurotics. The last point, it must be said, is not in itself a valid objection, for dreams are *regressive* and reactivate old infantile attitudes which need not therefore be in evidence in the daytime. Nevertheless, we must admit that our first statement was not quite correct, and that even normal adults have an Œdipus complex. The difference in this respect between the normal person and the neurotic is *quantitative*. Freud shows that it is characteristic of psychic development that, when an advance is made to higher levels, the former phases never wholly vanish, but continue in some degree to exist and can in certain circumstances be revived. He compares this development with the advance of an army which leaves troops to occupy all the places it passes through on its forward march. If it has to fall back, the main body of the army retires to the place where it left the strongest troops in occupation. If the garrisons thus left behind are very large, the vanguard will be correspondingly weak and more easily forced to retreat. The normal person has indeed also left forces in occupation of the situation which we call the 'Œdipus complex', but the main body of the army, the whole personality, has advanced. Under *very adverse* conditions, however, it may fall back



too, and so become neurotic. The person who is neurotically disposed, of whom we were thinking in speaking of neurotics so far, has left almost all his forces at the point of the 'Œdipus complex'. Only a small body has advanced; quite trivial difficulties suffice to force him to retreat and to re-animate his Œdipus complex. Thus the characteristic feature in the *neurotic disposition* is not the existence of the Œdipus complex but the failure to overcome it. The interest of the general etiology is shifted from the existence of the complex to the conditions under which it may be overcome.

The antecedents of the Œdipus complex and its subsequent history are complicated, and at the moment I will only outline them as far as we shall need them for the present discussion. This complex is the point of function, in the child, of two lines of development, both of which again may have suffered disturbance at any point: (a) We have first the development of the principal physical zones which are the source of the instinctual drives, i.e. the libidinal development characterized by the stages known as oral, anal and phallic. The Œdipus complex proper belongs to the phallic stage, but is being prepared for earlier and so contains to a greater or lesser extent oral and anal elements: (b) we have next the development of object-relations—the individual's attitude to external objects—i.e. the libidinal development characterized by what we know as narcissism (absence of any external object), by archaic, ambivalent object-relations with the idea of wholly devouring the love-object (total incorporation) or of biting off a part of it (partial incorporation); and, finally, by love and hate. The Œdipus complex proper belongs to the love-hate period, but it begins to develop earlier and so contains to a greater or lesser extent elements of the 'incorporation' phase. The mastering of this complex becomes necessary when the child acquires the conviction that the gratification of the desires bound up with it is highly dangerous. It is mastered by the complicated mechanisms which we comprise in the term 'super-ego-formation', through the child's learning to identify himself with his parents' requirements. Those who later on become neurotic succeed only imperfectly in this. To simplify matters we will on this occasion consider only one aspect of their failure. Identification with the parents, by means of which the Œdipus complex is mastered, is in fact a decisive step in the formation of human character. We will not now attempt to study the possible defects in this process, although it offers complicated problems which are to-day the focus of scientific interest. Instead, we will

turn our attention to the *libidinal Œdipus complex* which persists to a considerable degree in neurotics, so providing the opportunity for subsequent regression. We said that the idea that gratification of the wishes belonging to the complex was fraught with danger was the reason why the Œdipus complex passes. The danger so deeply feared unconsciously and thought to be bound up with the gratification of instinct is, first, that of the loss of the parents' love, and secondly—singularly enough—of physical injury to the genitals, i.e. of 'castration'.<sup>2</sup> It is the dread of loss of love and castration which opposes the instincts. If either this anxiety or the instinctual wish which it relates to is unusually strong or premature, there will be an unusually strong or premature *defence*, and what has thus been fended off prematurely or with special intensity can obviously no longer be dealt with by identification later on; it therefore persists unchanged in the unconscious.

It seems that the first of the two apparent problems is now satisfactorily explained. But the second has become all the more difficult. All that we have said goes to show that psycho-analysis to-day professes to know in advance what is the matter with *every* neurotic. There is a *general theory of the neuroses*, which is as follows: Neurosis occurs when an individual reacts to the disappointments of life by regressing to the Œdipus complex and then trying to defend himself against it. This can happen only when part of that complex, fundamentally unchanged, has persisted in the unconscious from childhood. This, again, can be the case only if the subject's love for the parent of the opposite sex and hatred for the parent of the same sex have been peculiarly strong or premature, and if he develops anxiety lest, because of this he should be left alone or have his genital organ violently injured. And further, there is also a *specific theory of the neuroses* which adds: Suppose that the pregenital development has been

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<sup>2</sup> The dread of genital injury manifests itself in the mental life of boys almost exclusively as dread of losing the penis—the organ from which pleasure is derived; the testicles play an astonishingly small part. Psycho-analytical terminology recognizes this fact, for in the *psychological* sense (as distinct from the accepted biological usage which implies by 'castration' the removal of the seminal glands) the term 'castration' is used primarily with reference to injury or destruction of the penis. In girls the 'castration complex' takes the form of 'envy of the penis' of the other sex: this is associated with the phantasy of having lost a similar organ (by castration).



correct, there will be repression of the Œdipus complex ; what will develop later will be *hysteria*. Or if, either by constitution or experience, the child has early, pregenital points of fixation, he will defend himself against the premature or over-strong Œdipus complex by falling back to these points. Anal-sadistic wishes will then surge up and if he makes various further attempts at defence but they nevertheless break through, the result is an *obsessional neurosis*, etc. So the diagnosis in itself enables us to say beforehand with some degree of approximation what must have been the patient's typical experiences in childhood. If, then, all these ætiologically important experiences are *typical*, why should we spend time and labour on the *atypical*, unique, traumatic features of personal history ?

The answer to this question, though a commonplace, cannot be sufficiently emphasized. All that we know of these typical experiences is their *form*, not their *content*. 'Œdipus complex' and 'castration-anxiety' are words : the psychic realities which they represent are infinitely various. The analytical theory of the neuroses is the *frame* into which may be inserted a thousand different pictures. What are 'love', 'hate' and 'anxiety' ? Affects, bound up with a hundred *individual memories*, each of which is unique. When a man says 'I love a woman', it tells us very little about his mental life, and children's love is no more uniform than that of their elders. We may draw a parallel with the concepts of the theory of heredity. There are *determining* factors which ensure the development of the Œdipus complex and of castration anxiety ; their occurrence is predestined. But the mode in which they occur—that is, the factors which *realize* them—depends on the actual events of the individual's life and his reaction to them ; and this, again, depends on his constitution and his whole previous experience. It is important to lay stress on this. *The work which has to be done by psycho-analysis on the histories of individuals and the difficulties arising out of this stand just where they did.* Quite recently Ferenczi<sup>3</sup> has very rightly emphasized how much of the old theory of traumas still holds good. In this he opposes the view of certain other authors who have erroneously held that children's constantly recurring phantasies of oral, anal and genital gratifications and anxieties, of castration and Œdipus complex, were more important than their real life. Not only does the character and behaviour of the

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<sup>3</sup> 'The Principle of Relaxation and Neocatharsis'. This JOURNAL, Vol. XI, 1930.

mother whom a little boy loves make the most vital difference, but also the child's idea of 'love' and the way in which such love fits into his whole mental structure will vary for every individual. Each case is unique.

It is impossible to lay down a law as to why the Œdipus complex is, in practice, mastered in one case and not in another. But we can understand how, in certain individuals, through particular experiences, or experiences reacted to with their particular constitution, the Œdipus complex and castration anxiety were prematurely aroused or exceptionally powerfully stimulated. And the comparative analysis of many individuals enables us to distinguish up to a point certain typical forms of the complex which depend on the subject's experience, unique as each case is. There are relatively typical responses to relatively typical experiences, and by these the *specific forms of the Œdipus complex* are governed.

This is at once clear in the case of the different ways of *mastery of Œdipus complex*. When this is achieved by identification, the resulting super-ego will vary as much as the possible educational influences brought to bear may vary. We do, in fact, find these manifold variations in human character. But we are not considering the conscious mind or the ego which is closer to consciousness, but the unconscious, which, paradoxically, is much better known to us. Yet the same situation holds good of the unconscious Œdipus complex and the castration-anxiety which threatens it.

Let us pass on without delay to examples which illustrate this variety.

We said that everyone suffers from the dread of his genital organ being mutilated. But the anxiety takes a different form in each person. And it is not only the secondary forms of anxiety—those products of displacement which are to serve as substitutes for the more deeply repressed genital anxiety—which depend on specific experiences in childhood. (For instance, one child, after the shock of a tonsil operation displaces his anxiety to the throat, while another, who is forced against his will to see a pigeon's head cut off, will retain throughout life a dread of decapitation as a substitute for the idea of castration. Again, conscious or unconscious dread of injury to the eyes indicates particular experiences in connection with sexual scopophilia, while the localization of anxiety in the thumbs shows that it has been acquired in connection with sucking for pleasure, in infancy.) Apart from these displacements, the form taken by the imagined



menace to the genital itself varies greatly. In males the most truly 'genital' form of castration pictured is that in which the father cuts off the penis as a punishment for the phallic wishes relating to the mother. There is a special form of anxiety, in which we have already an admixture of feminine tendencies, which regards just the father's penis as the menacing weapon. The penis may be thought of, according to circumstances, as exposed to what we may call a male threat, i.e. by a penetrating pointed object, or a female threat, by some sort of snapping instrument, according to which of his parents the boy fears more and what ideas his experience has led him to form about sexual intercourse. An individual who has an oral fixation will show anxiety lest his genital organ should be bitten off, and will develop a tendency in his turn to bite off other people's. This may give rise to curious composite anxieties: the dread of being eaten being fused with the dread of castration, in the shape, perhaps, of the dread of being robbed of the penis when it is inside a woman's body. This is the meaning of the fairy-tale of the Dwarf Nose, who gets into an enchanted castle (symbolizing the inside of the body) and leaves it with a long nose (as a compensation for the idea 'without a nose').

Often, however, castration anxiety takes quite grotesque forms, sometimes shaping the whole course of the subject's life which can be explained only by some unique experience. For instance, a patient of marked oral tendencies, who unconsciously equated sexual gratification with devouring, and who, besides, had come to adopt the feminine attitude and made his father his chief love-object, had heard that his mother was threatened with '*Krebs*'<sup>4</sup> and later on had learnt about bacteria. When he discovered that females had no penis, he constructed the following remarkable phantasy-theme: his Œdipus wishes had taken the form of the desire to eat the father's penis or what came out of it. His castration-anxiety, acting as a defence-mechanism, took the form: 'but if I eat these little creatures and they grow into children inside me, when they are being born they will eat away my penis from inside'. With girls the content of their anxiety varies according to the sexual theories which their predisposition and their experience have caused them to form. A girl who clings to the belief that she has a penis and that it is only small and will grow larger has the true dread of its being cut off, just as a boy has. If, on the other hand, she thinks that there is a penis hidden inside her body, she has a

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<sup>4</sup> [*Krebs* = cancer. The same word in German means 'crab'.—Tr.]

dread of operations (and a longing to be operated on so that the penis may emerge), whereas if her attitude is the feminine one but she happens, for example, to see the penis of a grown man, she is terrified by its size and fears that she may be torn and rent asunder by it. We can understand that these specific forms of anxiety are very important for neurosis and life in general.

Just as the anxiety-ideas vary, so do those about love and killing. Genital love has very many components and they may be very variously stressed. Apart from this, the genital wish may have a more or less strong pregenital tinge. (The sadistic Œdipus complex with a marked substructure of oral tendencies is met with in many forms of neurosis and is specially important.)

Death also may be conceived of in every imaginable way and is even sometimes sexualized into sadistic love, thus giving simultaneous expression to the inverted Œdipus complex.

Upon what experiences do the special forms of the Œdipus complex depend? Upon all experience. There is no perception which does not immediately enter into the instinctual nexus. All the child's experiences at the period of the Œdipus complex, but also everything that had ever happened to him before, exercise an influence; the experience of the earlier period will do so mainly in the sense that if it has taken a pathological form it will from the outset give a pathological, i.e. excessively pregenital, colouring to the formation of the Œdipus complex itself. Indeed, children whose earliest phases of development have been seriously disturbed will never achieve an Œdipus complex at all: in their object-relations they remain throughout life fixated on 'pre-Œdipus' levels. Such cases however no longer come under the heading of neuroses; they involve most serious malformations of character and anomalies in development and approximate to psychosis.

What are the specially influential experiences which we must consider? They are of two kinds: (a) single traumatic events; and (b) chronic influences.

To the former psycho-analysis has always attached special importance. They often supply the sufficient reason why the Œdipus complex or castration anxiety have become operative so strongly or so early that the former cannot be mastered in the normal way. Now what has this traumatic effect? Special forms of gratification or frustration, or experiences in which the two are combined, especially if they occur suddenly and unexpectedly. As we are speaking of the genital Œdipus complex, let us consider first of all the genital factor.



*Children who have been seduced* are specially strongly 'genitalized': they are unable to effect the normal inhibition of their instinctual aims and therefore are forced to repress them; but this, of course, means that their anxieties are peculiarly intensified. In general, everything which causes anxiety, especially genital anxiety, may be classed as a 'trauma'. This includes all threats and real experiences which act as threats, such as accidents, injuries and deaths, which seem to reinforce the belief in castration; or the *sudden* sight of the genitals of an adult, which, in the case of male and female alike, tends to produce an intensification of castration anxiety. And castration anxiety, when specially intensified, produces repressions and therefore disturbances in the mastery of the Œdipus complex. Experiences in 'aim-inhibited' fields may, by displacement, have the same effect as genital experiences. Of special importance in this connection are survivals from the pregenital period, 'fixations', as we call them, due to some special experiences during the oral or anal phases of libidinal development, particularly during the periods of weaning and training in habits of cleanliness. It is not necessary indeed for the content of these experiences to be itself of an oral or anal character; it is enough that they take place at that particular period. Of special importance for the Œdipus complex is all that the child learns or puts together in its own mind about the sexuality of its parents; here again, the effect is specially strong if the knowledge comes suddenly, as a surprise. Often the child combines real experiences with erroneous perceptions. We have an example of this in the whole field of *sadistic conceptions of sexuality*. The most important factor in this connection is the so-called *primal scene*—the observation of parental coitus. An experience of this sort acts as a most powerful sexual excitation (the content varying greatly, according to the age of the child) and at the same time convinces him of the danger of sexual gratification, either because he misinterprets what he observes, taking it to be a sadistic act, or because he catches sight of the 'castrated' female genital. The content and intensity of the effect of such an experience and the moment at which it makes itself felt naturally vary according to its details: what the child perceives, what he is able to guess and in what mental context perception and guesses are set, whether they are elaborated and assigned to their place in the mental scheme at once or later—all this depends on individual factors. It is certain that the primal scene does influence the Œdipus complex, but in different ways, according to circumstances. Invariably, however, the concepts

'sexual gratification' and 'danger' are coupled in a special way, and this must increase the tendency to repression. Observations of the coitus of animals or the sight of the genitals of human adults, or even of animals, can take the place of an actual primal scene as psychically equivalent to it, especially if other, objectively harmless situations assist the transference of such experiences to the parents. Freud has pointed out that the idea of overhearing the primal scene is included amongst what we call 'primal phantasies' and that, where no such experience has taken place, phantasies are substituted for it; nevertheless the impression remains that the actual experience acts with quite another traumatic force than a phantasy. The second most important factor is the birth of younger brothers and sisters, not only because this produces a traumatic disturbance of the Œdipus gratification (because the parents cannot give the child so much attention as before), but also because his sexual anxiety is increased by his perceptions or speculations with reference to the act of birth and because of the impetus given to his own tendency to regress to the pregenital delights of the suckling period.

Now to turn to the consideration of chronic experience—a child's reaction to his parents and the demands he makes on them will depend on who and what these parents are and how they behave towards him. Where the parents or their behaviour are unusual, the reaction will be unusual. That this is really so is already made clear by the first broad family history recovered from neurotics. Neurotic parents have in their turn neurotic children, and the child's Œdipus complex reflects that of his parents. For this complex in children is in part stimulated also by the corresponding attitude in their parents: the father loves the daughter and the mother the son. This unconscious sexual attachment to the children becomes specially strong wherever the parents' real sexual gratification leaves them unsatisfied, whether from external or internal reasons (e.g. owing to their own neuroses). This attachment then proves a fatal thing for the children, for they on their side inevitably develop a corresponding excessive Œdipus complex.

The ideal Œdipus complex requires a threefold relation. Only children have, typically, a particularly strong Œdipus complex, because there is no one to whom they can transfer their feelings from the parents. 'Special forms' of the complex arise when there are too few or too many persons involved. Thus from the point of view of the Œdipus complex the child brought up in modern family life feels its



*brothers and sisters* to be superfluous. They are, above all, objects of jealousy and, according to the individual circumstances, they may either increase the hatred directed in the Œdipus complex against one parent or they may deflect it and so diminish it. But the brothers and sisters may also be love-objects and so serve for the transference of love. This is specially the case with those who are older or not more than a year younger than the child himself, so that he has never known what the world is like without them. Often, when there are several elder brothers or sisters, we find a 'double' of the Œdipus complex, and then there occur processes analogous to those which have reference to the parents, sometimes forming a useful outlet but sometimes giving rise to new conflicts. Younger brothers and sisters are generally viewed principally as rivals, but, in certain circumstances, especially if the difference in age is considerable, the child may regard them as his own children. It will then depend on the rest of the Œdipus situation whether the complex receives additional stimulation or whether its intensity is decreased by its imaginary gratification. We find the opposite side of the picture—the Œdipus complex with too few protagonists—where children grow up without parents or with only a father or a mother. We will consider later the case of children not brought up in a family. Here we will deal rather with the cases in which one parent has died early or left the family circle. Of course, it makes the greatest possible difference here whether the children have or have not known the missing parent, whether there are step-parents, when these appear on the scene and how they behave. But even when a child has never known the missing parent, he does know that that parent once existed and that other children grow up differently, that is, with both a father and a mother. He then tends to regard himself as an 'exception', to whom fate owes some special compensations, and this in itself may act as a reinforcement of the Œdipus complex. In general one may say that when the parent of the child's own sex dies, this is perceived as a fulfilment of the Œdipus wish and specially strong feelings of guilt are therefore aroused. If the other parent dies, the Œdipus longing which remains unsatisfied leads to the phantastic idealization of the dead parent and to an increase of the longing. The rest depends upon when and how the parent's death becomes known to the child. There are two points which I think are very fateful in this connection. First, we find a very close and almost indissoluble connection between the ideas of 'sexuality' and 'death', for they are found together through their common sphere, that of the

'grown-ups' secret'. The result is a strengthening of the masochistic tendencies, for, if sexual gratification is thought of as associated with dying, death itself becomes a thing longed for. Or, on the other hand, most intense sexual anxiety may be aroused, for in the unconscious the subject has the conviction that gratification involves death. This anxiety then produces a repression of sexuality, which has most far-reaching effects. Secondly, in his grief for the dead, man commonly regresses in some measure to the oral level of libidinal organization and identifies himself with the dead love-object as a form of consolation for the loss. If this happens at an early age, fixations will result which will be profoundly significant for the Œdipus complex and the subject's whole life. In this way the child acquires not only an oral fixation but also the tendency to mingle a considerable amount of identification with all his subsequent object-relations, thus including the Œdipus complex. Thus, for instance, a patient who had lived happily with a man for years, refused to marry him, though she could give no reason for the refusal. Analysis revealed that 'marriage' signified to her 'having children', and that she had a strong unconscious dread of pregnancy and parturition. Her mother had died when the patient was four years old; the child had at that time developed the phantasy that her mother's death was connected with sexuality or birth and now, as a punishment for the gratification of her Œdipus wishes which she had experienced on her mother's death, she anticipated that she herself would have to die in a similar fashion. Something very analogous was observable in the case of a male patient whose castration-anxiety had prematurely driven him over to the feminine attitude. On his mother's death he developed the most intense dread of castration and death, which manifested itself later in hypochondriacal ideas. The unconscious content of his hypochondria was as follows: 'I must die like my mother because I have put myself in her place. If my father gratified my wishes and made me pregnant, as he did my mother, I should have to die'. Here the analysis showed very clearly the marked condensation of the sexual mystery and the mystery of death, which imparted a special tinge to the castration-anxiety, leading to a dread of 'being gone' and to the unconscious equating of all that may vanish away—corpses, fæces, the penis.

To this must be added that the death of the parents represents a peculiar fulfilment of the Œdipus complex: directly, if it is the hated parent who dies; indirectly, through idealization, if it is the loved parent. This enhances the intensity of the Œdipus complex and



reinforces the subject's defence (his feelings of guilt). Thus one of my patients, who had also, when she was five years old, lost her mother, told me that, though she was usually a subdued child, inclined to depression, there was one summer when she had been really happy. It was only analysis which, to her great surprise, revealed to her the fact that it was the summer immediately following her mother's death : for that period she had felt that her wishes were fulfilled and that she was succeeding to her mother's place. These expectations were doomed to disappointment, when she perceived that the grown-ups, and especially her father, continued after all to treat her as a child. Her reaction to this disappointment was inevitably an oral-sadistic one, for it was precisely this mode of reaction which had also been activated by her mother's death.

A boy who has lost his father (or whose father is a cypher in the family) easily becomes homosexual or feminine in his attitude. This is because he identifies himself more with the parent at whose hands he experiences the chief frustrations in his life. One patient, who had never known her father, was sadistic in all her relations with men, her behaviour conforming to the extreme ' revenge ' type of the feminine castration complex. Her phantastic Œdipus complex, never corrected by any actuality, impelled her in the first place to hate all men, because none of them was as her father, whose death had made him god-like ; and, secondly, over and above this, the impossibility of satisfying one half of the Œdipus complex caused the other half to develop to all the more grotesque proportions. Unconsciously she hated her mother fiercely for having enjoyed the father's love and yet having let him die, and so depriving her both of her father himself and of the penis. This very intense hatred meant for her mother she had likewise transferred to all men. Another patient who suffered from acute depression and general inhibitions had the following early history : when she was only about a year old, her parents had separated and she had never seen her father again. She thereupon developed the following Œdipus phantasy : ' My father could not endure life with my mother : she was not worthy of him, but one day he will come and take me away with him '. He did not come. This gave rise to a tremendous reactive hatred which, in her state of depression, the patient turned against herself with the following unconscious rationalization : ' I too am entirely worthless and unworthy of him. That is why he does not come '.

It is obvious that conflicts between the parents and their temporary

or permanent separation must have a similar effect on a child to that of their death. If the children themselves are the bone of contention and each parent tries to win them over, the result is likely to be a special accentuation of the complete Œdipus complex and a fixation at the infantile narcissistic level, which causes them to believe that the whole world will woo them as their parents have done. Expectations of this sort inevitably lead to disappointment.

We have said that, if the parent's character or behaviour is unusual, the child's reaction will be unusual. 'Unusual behaviour' is to be interpreted as spoiling a child, or frustrating its desires, or a combination of the two. Spoiling and frustration are in one sense complementary, for it is just the spoilt children who are bound to be traumatically affected by those indispensable frustrations which are otherwise easy to endure. We are least concerned here with deliberately adopted methods of discipline and most with the involuntary, everyday, real behaviour of the parents. Two points should be noted as specially important. The first is the parents' attitude towards the child's sex : very often a mother only desires a son and lets her daughter feel it, and so forth. And the second is the parents' attitude to one another, for this is the source of the child's ideas of sexuality. We have only to think of unhappy marriages and their effect on the instinctual life of the child.

The whole 'moral code' of the house, then, influences the form of the Œdipus complex. The extent to which a child regards his instincts as permissible or as something fatally 'bad' depends not only on whether, when and how he is forbidden, for example, to practise onanism, but ever more on the type and force of the *general standard of sexual morality* which prevails in his home. Knowingly or unknowingly, on principle or by chance, his parents in all that they say and do testify to his standard. The idea thus inculcated that 'instincts are bad' has the same effect as the continual prohibition of onanism, and, since infantile onanism is the active expression of the Œdipus complex, the result is to intensify the tendency to repress that complex. The most important combination of spoiling and frustration—one which is very common—is an enhancement of excitation in children by excessive tenderness on the parent's part, with simultaneous prevention of gratification, i.e. the appropriate discharge of this excitation, by prohibitions. I have already said that in such cases the parents' own unconscious Œdipus complex is the determining factor in what takes place. Very often mothers say to their sons and fathers to their daughters, 'in fun', that they do not want them to marry, because



they want to be always with them, etc., etc. In the anamnesia of psychoses we sometimes meet with the most extreme forms of the 'parents' Œdipus complex'.

These observations do not apply to the genital field only. We have seen that there is a pregenital foreshadowing of the Œdipus complex and that the methods by which children are weaned and trained in habits of cleanliness leave their mark and help to determine from the outset the form which that complex will take. This is a very difficult matter to elucidate in analysis because everything which is the result of regressive distortion has to be eliminated from the blend of Œdipus complex and pregenital impulses presented by the material which comes to the surface. I have tried to sum up a few contributions to this topic in a short paper, 'Pregenital Antecedents of the Œdipus complex'.<sup>5</sup> From the point of view of clinical practice and the study of character I think that the 'oral-sadistic' form of the Œdipus complex is of special importance. Here the demand for gratification from the parent of the opposite sex may be expressed as follows: 'You *must* give it to me or else I will take it by force'. By 'it' is understood (in the different strata of the unconscious): gratification, a child, the penis, fæces, milk. Whether this form of the Œdipus complex will develop depends on the child's experiences during his training in cleanliness and when he is at the mother's breast. In my paper I was able to give a detailed account of the case of a man who, as an infant, had had eighteen months of complete oral indulgence and then suddenly underwent the most drastic frustration. The result was a negative Œdipus complex, characterized by sadistic demands. The patient had no profession but lived the life of a passionate gambler, unconsciously governed by the one idea directed towards his father: 'You must give me all your money'. In another case a girl had to be weaned because her mother contracted mastitis and this experience acted on her traumatically. Subsequently her mother evinced much libidinal interest in the child's training in cleanliness. At the age of six she fell ill with an intestinal trouble. She reacted with the phantasy that her mother had made her ill by taking 'it' (i.e. fæces—the penis) away from her. Later, in the Œdipus complex, the phantasy went on that her father must give back what had been taken away. In the face of the ascetic character of the father, whose ideal was, above all things, self-control, she maintained her unconscious demands with an un-

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<sup>5</sup> This JOURNAL, Vol. XII, 1931.

bridled passionateness, which, for example, expressed itself at times in a kind of pseudo-nymphomania.

The character of the parents is, however, also regularly reflected in the children's Œdipus complex in forms less obvious than those I have mentioned. To take a simple example, the father of one of my women patients had a contempt for all women and frequently reiterated his feeling. He laid great stress on 'modesty' and demanded that all anal impulses should be repressed. He showed a marked preference for the patient's elder sister. The patient was then as a child confronted with the following tasks: She loved her father, but she had to eliminate loving the penis, for it marked the difference in sex which made him despise women. She also had to suppress her constitutionally strong anal erotism. She wanted to do her sister an injury and she had to endure her father's severity and contempt. She solved the problem by becoming a masochist, whose sexual aim (of course, unconscious) in accordance with the Œdipus complex, was to be beaten and despised by her father. Thus the contempt which jeopardized her father's love for her actually became a condition of that love; the offensive penis was replaced by the hand which struck the blows and the offensive anus by the buttocks. Moreover her hatred of her sister thus found a vent also, for, at bottom, the imaginary whippings were destined for her and had only later been turned against the subject's own ego (herself). With many people we are struck by the fact that their love-relations always have the remarkable characteristic of 'dread of the community' focussed in the love-object. What such persons want above anything else from those whom they love is judgement, forgiveness, and, in some circumstances, also criticism, condemnation and punishment. Analysis then shows that this curious, narcissistic kind of love has had its origin in the Œdipus complex which has assumed this pathological form owing to pathological behaviour on the parents' part. That is to say, the parents brought the child up very strictly, in a way which fixated him upon the ideas of guilt, punishment and forgiveness, which were continually being thrust into the foreground, whilst at the same time forbidding all direct expression of instinct. Nothing was thus left for the tramelled impulse to do but to effect cathexis of the only sphere left open to it. At the same time the training in question, by its inconsistencies, brought the child to the point of forming no independent judgement of what was good or bad but allowing the love-objects of the period to decide this as a mode of sexual gratification. Let me quote



as a last illustration of this point an example which is trivial, indeed, but all the more obvious. The father of a patient with a very strong father-fixation one day sent the following telegram to his forty-year-old son, then more than 400 km. away and recovering from an attack of angina : ' In view uncertainty weather, don't go out to-day '.

It will have been noted that we have as yet said nothing about the significance for special forms of the Œdipus complex of what is probably the most important feature in the child's real experience in the world of to-day, viz. the *social status of the parents*. We must now repair this omission. Analysis of the most common phantasies of children on the subject of social position shows that in the unconscious the socially humble is equated with the instinctual, the socially superior with the inhibited or sublimated. Recently Helene Deutsch has demonstrated this fact anew and very clearly in her analysis of the so-called ' family romance '.<sup>6</sup> When a member of a family of high social standing feels himself especially attracted to the lower classes, analysis generally reveals a tendency towards the purely instinctual, as, for instance, in the preference of a prostitute in contrast to a love-object of good position. The mechanism is that of idealization : ' I help my fellows ; I am not so unjust as my father ; I sublimate my sexuality into love of humanity '. But all such reflections on these or similar unconscious equivalents of class-distinctions as revealed by analysis do not help *in the least* to answer our question : what is the effect of real social status on the real Œdipus complex ? We are not considering unconscious *phantasies* about social position but the influence of that position *in reality*. This influence is incessantly brought to bear upon the child and must therefore prove significant for the shaping of the Œdipus complex just as much as the character of the parents. That this happens was shown by Freud in his famous example : ' On the Ground-Floor and in the Mansion ' in his *Introductory Lectures on Psycho-Analysis*.<sup>7</sup> We have only to think of the bearing of the housing shortage on the ' primal scene ' to realize instantly how important this factor is. Bernfeld<sup>8</sup> has shown that certain modes of mental development can occur only under the conditions provided in a given social stratum. For instance, it is only in a certain ' social

<sup>6</sup> H. Deutsch, ' Zur Genese des Familienromans '. *Internationale Zeitschrift für Psychoanalyse*, Bd. XVI, 1930.

<sup>7</sup> P. 296.

<sup>8</sup> Bernfeld, ' Der soziale Ort und seine Bedeutung für Neurose, Verwahrlosung und Pädagogik '. *Imago*, XV, 1929.

region' that it is possible to escape from depressive states or the dangers of loss of love by simply running away. Yet, having said all this, we must admit that according to analytic experience the part which this important circumstance of the family's social status plays in giving to the Œdipus complex its specific form is less than might be anticipated. What is the explanation? Is it perhaps that, so far, psycho-analysts have drawn their material too much from one social stratum only? Or is it not rather that in our modern society middle-class morality and middle-class principles or the training of children prevail as much in the homes of the proletariat as in those of the middle-classes themselves? In my opinion this fact renders it impossible in the society of to-day to make any pronouncement as to what would be the relation between training and instinctual development in the absence of the middle-class code of morality which dominates the former, even if we select for our investigations persons belonging exclusively to the proletariat.

The position is somewhat analogous when we turn to the problem of the Œdipus complex in children who are not brought up in any family. For none of these children really lives entirely without any family influence. Sooner or later they learn that the institution of the family exists and wherein it consists: that other children have a father and mother, and that they themselves are the inferior exceptions. They too have their Œdipus complex, i.e. not only instinctual attachments of love and hate to those who bring them up and to all grown-up people with whom they come into contact, but also phantasies about father and mother—phantasies which closely resemble the Œdipus complex of other children, only drawing a special form from their phantastic character. Their Œdipus complex is characterized by the discrepancy between phantasy and reality, though of course the phantasies draw sustenance from real experiences. In so far as they have been analysed, we may say of them that the same applies to them, in a double way, as we found true in the case of children who have not known one parent. If they do not grow up in a situation, e.g. within a community, which still allows of their forming firm attachments, but are constantly moving from place to place and being exposed every year to fresh influences and brought into contact with new people, two results will follow. First, their characters will become full of contradictions (asocial types with super-ego aberrations always present this sort of anamnesia) but to go into this aspect of the question would take us too far. Secondly, they have never rightly



learnt to love and to hate : their Œdipus complex is phantasy and the reality is an infantile-narcissistic form of object-relations, which is governed by identifications and their accompanying conflicts and dread of the community instead of by love and hate. In a permanent community, on the other hand, there is always somebody to play the part of father or mother, but of course, even so, the difference between being brought up in such a community and being brought up by the child's own father and mother will be reflected in the Œdipus complex.

There is, then, no doubt that the specific forms which that complex assumes depend on individual experience. But what of the frame of the picture ? Is the Œdipus complex itself—the fact of love and jealous hatred of the parents—a biological datum, as a physical organ like the nose or the thymus gland is a biological datum ? Or is it not ultimately also a product of experience, arising out of the institution of family up-bringing, and, as such, changeable ? Put thus, the question is intrinsically absurd ; for, if we believe in the theory of evolution, it follows that the complex *must* be variable, since then the nose too, like all characteristics of species, is changeable. It is true that according to the theory of evolution it is not individual but phylogenetic experience which counts. There are many points about the Œdipus complex, in especial its close connection with archaic modes of thought and with the idea of castration, which indicate that it too has its phylogenetic roots. Freud supposes that it was acquired at the period when all human society took the form of the horde, the precursor of the family. We may join in Freud's suppositions without committing ourselves to an opinion whether this patriarchal horde must be regarded as the first or as a later form of human organization. In any case, to assume that the Œdipus complex has this phylogenetic root is by no means to contradict the notion that the complex itself is bound to change when the institution of the family disappears or changes. This is really quite obvious and what we have found as regards the specific forms of the complex forces such a view upon us. If there are no parents to bring children up they will indeed still feel love and hate for the adults round them and conflicts will still result. But this phenomenon can only be called the Œdipus complex so long as it is accompanied by the parent-phantasy and so long as love and jealous hatred are combined as they inevitably are in the family-situation. That a different *milieu* calls for the different reactions and that all the phenomena of life are in flux is an obvious inference from the Darwinian theory, but of course we must not suppose that such modifications are very rapid.

## THE HISTORY OF THE ŒDIPUS COMPLEX<sup>1 2</sup>

BY

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The central discovery of psycho-analytical research is this: that all little children have sexual impulses and go through a phase of incestuous attachment to the parent of the sex opposite to their own and, further, that the ideas associated with these incestuous wishes persist in the unconscious throughout life. The main reason for the hostility at first encountered by psycho-analysis in educated circles was undoubtedly its advocacy of this doctrine. We hold that the reactions of the individual to these wishes of early childhood have a great influence upon the formation of his character and we trace many of his interests and his behaviour in life in various respects to the elaboration of these unconscious desires. We are convinced that in the unconscious every man cherishes a life-long wish for union with his mother and that he has an unconscious tendency to injure and remove by death all his rivals in relation to her: his brothers and, above all, his father. We discover by the psycho-analysis of female patients corresponding wishes in women, and use in both cases the expression 'the Œdipus Complex' as a comprehensive designation for these unconscious wishes. The doctrine of these unconscious wishes is one of the corner-stones of psycho-analytical theory.

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<sup>1</sup> Read before the Conference of the German Psycho-Analytical Society, Dresden, September 28, 1930.

<sup>2</sup> Compare the following works. Rank: 'Völkerpsychologische Parallelen zu den infantilen Sexualtheorien', *Zentralblatt für Psychoanalyse*, II, 1912, pp. 372 and 425. *Das Inzestmotiv in Dichtung und Sage*. Leipzig and Vienna, Franz Deuticke, 1912. Malinowski: 'Mutterrechtliche Familie und Œdipuskomplex', *Imago*, X, 1924, p. 228. *The Sexual Life of Savages in North-Western Melanesia*, London and New York, 1929. Reitzenstein: 'Der Kausalzusammenhang zwischen Geschlechtsverkehr und Empfängnis in Glaube und Brauch der Natur- und Kulturvölker', *Zeitschrift für Ethnologie*, Bd. 41, 1909, p. 644. Lublinski: 'Eine mythologische Urschicht vor dem Mythos', *Archiv für Religionswissenschaft vereint mit den Beiträgen zur Religionsgemeinschaft in Stockholm*, Treubner, Leipzig and Berlin, 1923-24, Bd. 22, Heft 112. I have taken single sentences and paragraphs from these works, in some cases literally, without referring to the authors on each occasion. Here also are to be found the exact original sources.



To elucidate the term 'Œdipus complex', I will give briefly that version of the well-known Greek legend of Œdipus which we find in the *Odyssey*. Œdipus was the son of Epicasta, whom he married (both being ignorant of their relationship) after having killed his father. When Epicasta learnt the truth, she hanged herself, while Œdipus, tormented by the Furies, continued to reign in Thebes, the victim of cruel sufferings. This legend was worked up in various ways by a number of Greek dramatists, twelve of whom are known to us. Amongst these were Æschylus, Sophocles, Euripides, Xenocles and Achæus. The version of the Attic tragedians was as follows: It was prophesied to Laius, King of Thebes, and to his wife, Jocasta, that their son would murder his father. They caused a slave to pierce the baby's feet and to expose him, but he was taken to the King of Corinth, where he was reared. He consulted the oracle about his origin, and was told that he would murder his father and wed his mother. Thereupon he left Corinth and, on the way to Thebes, met his real father in a narrow pass, quarrelled with him and killed him. He then delivered Thebes from the sphinx and as a reward received the throne and the hand of the king's widow in marriage. He lived with her in happy wedlock and had four children by her. But a pestilence fell upon Thebes, and the oracle promised that the city would be saved if the man who had brought the curse upon it were driven forth. The seer, Tiresias, then revealed the secret, whereupon Jocasta hanged herself, Œdipus put out both his eyes and was driven out and, after long wanderings, was mysteriously translated from the earth. Later he was regarded as a hero and his bones were considered a protection against invasion by enemies.

Up to the present day this dramatic theme has been constantly taken up again by one writer after another, and has been treated in the most varied ways. Two such writers, amongst the Romans, were Seneca and Julius Cæsar. (It is noteworthy that the latter recollected a dream in which he had intercourse with his mother.) Voltaire's first play, written at the age of nineteen, had Œdipus for its subject, and Corneille, shortly after his father's death, wrote *Œdipe*. Twenty years later the English dramatists, Dryden and Lee, published an *Œdipus*. Other authors who have worked on the same theme are, in France, La Motte, La Tournelle, Robert Garnier and Chénier, in England Whitehead, and in Germany Hans Sachs (*Jokaste*). Schiller treated the subject of a son's incestuous love for his mother in *Don Carlos*. Hölderlin, again, gives us a rendering based on the Sophoclean *Œdipus*

*Tyrannos*; this author displayed in real life the typical picture of son-mother love, in always falling in love with other men's wives. Among German writers, furthermore, Lessing at the age of nineteen wrote *Giangir oder der verschmähte Thron*, a variation on the same theme. But one of the clearest portrayals of incestuous love between mother and son is to be found in Hugo von Hofmannsthal's *Ödipus und die Sphinx*.

Now it can hardly be doubted that material which for more than two thousand years writers have been continually trying to master must embody a problem of the very greatest significance, especially when we learn that the Greek *Œdipus* has been translated countless times in different countries and periods. We believe that each of the individual treatments reflects the personal psychic history of the individual artist. We can see this most clearly from a comparison of Hebbel's diaries with the outlines of his plays. At the age of nineteen, whilst still living at home, he wrote his first dramatic attempt and called it *Der Vatermord*. The plot is as follows: the hero, Fernando, is about to shoot himself on account of his gambling debts, when Count Arendel seizes his arm and saves his life. In his deranged state, however, he takes the Count for the devil and shoots him dead. Thereupon Fernando's mother, apprehensive of some disaster, appears and reveals to him that the dead man is his father. The following dialogue takes place. *Fernando*: 'Not my father but my executioner, who branded me in my mother's womb, before I had my being—not my father but the seducer of my mother'.

*Isabelle* (the mother. Throwing herself upon the corpse with a cry of despair): 'Man—son—Fernando, I pray you, I beseech you, give me back the man I loved so dearly'.

At the age of twenty-one Hebbel noted in his diary: 'Recently I dreamt myself right back into my anxiety-haunted childhood; there was nothing to eat and I quaked before my father, as I used to do'.

At the age of twenty-five he noted another dream: 'I cannot rid myself of the idea that I shall soon die; last night, in a dream, I saw my father, who died long ago and whom I have scarcely ever before seen in my dreams'. Ten days later he wrote: 'How gloomy and desolate my childhood was! My father actually hated me and I, too, was unable to love him'.

Many thoughts which Hebbel jotted in his diary, to be worked out on some future occasion, have to do with a son's hatred of his father. For instance: 'A weakly son challenges his father to a duel, because



before marriage the father had squandered too much of the son's property, i.e. before begetting the son the father dissipated the vital essences which were to go to form the child'.

At the age of thirty-three he notes the following aphorism: 'There was no incest amongst the first human beings'.

These remarks of Hebbel's, taken in conjunction with the plots of his dramas, certainly suggest that his hatred of his father had its source in an unconscious sexual rivalry with him.

Now if the son's hatred of the father, of which we find constant evidence in newspaper paragraphs and plays (e.g. Hasenclever's *Der Sohn*) can in general be traced back to sexual rivalry, it could not appear where this sexual rivalry did not exist. We have in fact illustrations of this. Writing of the Persians, Herodotus<sup>3</sup> says: 'Before his fifth year a boy is not seen by his father but lives with the women', i.e. precisely during those years which are in our view decisive for the subsequent psycho-sexual attitude. Schiller-Tietz<sup>4</sup> tells us that it is quite certain that amongst the ancient Persians marriage between blood-relations was in no way prohibited. Not only brothers and sisters married, but even father and daughter, mother and son. Indeed, for certain spiritual offices the progeny of such unions were definitely called for. After the father's death the son was allowed to marry his mother (especially amongst the Magi), as we learn from Arnobius,<sup>5</sup> Herodotus<sup>6</sup> and several other historians of antiquity.<sup>7</sup> In another passage<sup>8</sup> Herodotus specially stresses the fact that amongst the Persians parricide was unknown: in any ostensible case closer investigation invariably showed that the agent was a bastard or a changeling. It seems legitimate to suppose in explanation of the facts that the far-reaching sexual freedom of the Persian son in his relations with his mother deprived his infantile attitude of hatred towards his father of its erotic sources of affect.

We may ask whether it is permissible to generalize this relationship, i.e. whether it is universally the case that where no jealousy of

<sup>3</sup> I, c. 136.

<sup>4</sup> *Folgen, Bedeutung und Wesen der Blutsverwandtschaft im Tier- und Pflanzenleben*, 2 Aufl., Berlin, 1892, p. 8.

<sup>5</sup> *Adv. gentes.*, I. 8.

<sup>6</sup> III. 13.

<sup>7</sup> Diogenes Laertius proem. 6; Plutarch: *Artaxerxes*, c. 26; Ctesias: *Pers. Ecp.* 47; Agathias II, 23; Heracl: *Cum. fragm.* 7 ed., Müller.

<sup>8</sup> I. c. 137.

the father develops, neither do any death-wishes against him arise. I believe that this is so, but I will return to the point later.

For the moment let us go back to our point of departure: the ideas held by the ancient Greeks. I said that we met with the Œdipus drama for the first time in the *Odyssey*. That statement is only partly correct, for the son's jealousy and hatred of his father manifest themselves not only in death-wishes against him but also in the wish to make him innocuous as a rival through castration. And the Greek cosmogony begins with the castration of a father by his son. Gaia, the Earth, brings forth spontaneously, 'without gracious love'<sup>9</sup> her first-born son, Uranos, the Sky, who begets by his mother the Titans, the Cyclops and three giants with a hundred arms. But Uranos hates all his sons and, immediately after their birth, hides them away in the earth. Whereupon Gaia avenges herself through one of her sons, the youngest Titan Chronos. She gives him a mighty sickle and when Uranos next approaches Gaia to embrace her, Chronos falls on him out of his ambush, cuts off his father's penis and throws it into the sea. The foam thus caused gives birth to Aphrodite. The earth receives the drops of blood as they fall, and from them are born the Erinnyes, the giants and the melic nymphs. Chronos ascends the throne, weds his sister, Rhea, and reigns during the Golden Age of Greece, till he is overthrown by his son, Zeus.

In our view, the son's Œdipus wishes are inextricably bound up with castration-tendencies against the father. But we can learn still more from the Greek myth of creation. Here we have the idea of incest: Uranos begets children by his mother. We note, however, a further point, namely, that the Greek myth already recognizes procreation by means of the male genital. But is there anything remarkable in this? Should we not assume it to be a piece of universal knowledge from the first beginnings of mankind? I will return to this question shortly, but may point out here that it is only through the researches of the Dutch scientist, Swamerdam, who died in 1685, that we have learnt that to secure fertilization there must be contact between ovum and semen, and that we only know since Barry's work (1850) that the spermatozoa must penetrate the ovum! At all events we see in the Greek myth that the sexual act is not absolutely necessary for propagation: Gaia bears her sons without any previous act of love and the fallen blood-drops also generate living beings.

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<sup>9</sup> Hesiod: *Thes.* v. 132.



Perhaps it is worth while to dwell a little further on the Greek myths. We meet with incest immediately : Chronos begets a number of sons by his sister, Rhea—chief amongst them, Zeus. Zeus swallows his eldest wife, Metis—sagacity—because he fears she will bear a son who will wrest from him again his hard-won dominion over the world. He himself then gives birth from his head to the goddess of wisdom, Pallas Athena. Although procreation by sexual union is recognized in Greek myths, it is held to be equally possible for living beings to come into existence in other ways, independently of any such union.

We find a similar idea in the theogony of the Egyptians also. Egyptian texts tell us about the god Ra <sup>10</sup> that ' the God bethought himself in his heart to create other beings, and he begat of himself and spat it out. And what he spat out was the god Schu and the goddess Tefnet '. In some other Egyptian myths, however, children are produced by an act of sexual union in a marriage of gods. Here again we meet with incest : the god Amon is called the husband of his mother Neith. In a legend of the Indian Archipelago we find the same combination of conception without any previous sexual act and of incest : ' Luminatu conceives by the wind and then weds the son thus engendered '. In a myth of the world-parents, which belongs to Jorub (Africa), we find incest and an infantile theory of birth (by the opening of the mother's body) :—The son and daughter of the world-parents marry and have a son who falls in love with his mother. She refuses to accede to his passion, so he pursues and rapes her. She springs to her feet and flees away, lamenting. The son pursues, in order to appease her, and when he has almost caught her, she falls to the ground with legs astride ; her body begins to swell, two streams of water well from her breasts and her body then bursts asunder and fifteen gods come forth from it '.

Here we have a myth-cycle widely diffused over the ancient world and characterized by several common elements, namely, the frequent appearance of incest and the genesis of children not only through a sexual act but by various other methods of procreation and birth, such as children imagine in their so-called infantile sexual theories. The fact that the baby grows within the mother's body is more or less divined by most children, especially if they have the opportunity of observing her during pregnancy ; this is why the fairy-tale of the

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<sup>10</sup> A. Ermann : *A Handbook of Egyptian Religion*, London, 1907, p. 26.

stork never gains full credence. But how does the baby get into and out of the mother's body? These are questions which children cannot solve by themselves, and so they try to find the answer in various phantasies. They imagine, for instance, that the baby comes into the mother's body when she eats certain things or that it is produced by kisses. They think that babies are born through the navel, which opens, or through the abdomen which has to be cut open or else bursts. The most common theory is that of birth through the anus, and so children of a certain age generally believe that men as well as women can have babies. Children cling to these theories very tenaciously and, later, are very reluctant to accept the real facts of procreation and birth. Fragments of these infantile sexual theories shew themselves in later life in different neurotic symptoms.

How can we explain the fact that in these myths we find side by side on an equal footing the idea of the genesis of living beings through sexual union and the most diverse other possibilities, such as are embodied by children in their sexual theories? It is nowadays a recognized dictum of natural history that ontogenesis—the evolution of the individual—is a brief and rapid repetition, conditioned by the laws of heredity and adaptation, of the process of phylogenesis—the evolution of the race, i.e. of the ancestral series of the individual in question. And Goethe says: 'Though the world as a whole advances, the young must nevertheless always begin again at the beginning and, as individuals, pass through the epochs of civilization'. Now we know from the analyses we have carried through that children may quite well be already acquainted with the process of impregnation and yet cling to their former infantile sexual theories out of a feeling of unsureness in their newly acquired knowledge. If we drew a parallel between the child's mind and that of the Greeks and other ancient peoples, we should have to conclude that, at the time when their myths were formed, their knowledge of the genesis of living beings by procreation was as yet no old and fully secure mental possession. We are in fact informed that the Greeks were ignorant of the fact of propagation by fertilization in many animal species and in plants.

In the development of our children, however, there is an early period in which they imagine every possible mode by which living beings might originate, but have as yet no idea of the sexual act. We should expect, then, that a more exact investigation would reveal an earlier mythological stratum in which human beings arise without any sexual act. And this we do actually find.



The North American Indians have the following myth<sup>11</sup>:— Yimantuwiniai (a kind of Creator or Culture Hero) defecated and said to the fæces: 'Become Yurok'. The Yurok went along with him and they overtook some women and told them that they had nothing to eat, whereupon the women gave them food. So they ate up the women's whole store of provisions. In the same way Yimantuwiniai created the Karok, Yurok, Shasta, Mad River, Southfork, New River and Redwood. The story goes on to tell how he again defecated and made a dog.

In Boas' *Indianische Sagen von der Nordwestküste Amerikas* (p. 172) we read as follows: O'meatl wanted some bacon and bethought him of a cunning device. He turned himself into an old, one-eyed woman. She defecated and said to her fæces: 'Now I am going to the village: do you call out "Hu, hu"'. Then she hobbled off and, when she reached the village, she cried: 'Enemies are coming! Enemies! Enemies! They will kill us all'. Then there was heard a shout of 'Hu, hu', as though a host of people were calling, and everyone was afraid and ran away.

In the same book (p. 159) Boas tells the following legend: Mink defecated on the river-bank and turned his fæces into a young man. He bade the youth say to everyone that he was the son of Hostamites and had been stolen away by Mink. To see whether the lad understood, he asked him: 'Who art thou?' and the reply was 'I was made out of Mink's fæces'.

Here we have three stories in which living beings are produced from human excrement, independently of any act of impregnation. Similarly we read of their genesis from urine. For instance<sup>12</sup> Silver Fox, having finally succeeded in killing Coyote, hunted out and scratched up all the places where the latter had urinated. But he overlooked one place and, from it, Coyote sprang again and reappeared. Another myth tells of the power of spittle<sup>13</sup>: 'My grandmother', says a warrior in the night after he alone had returned from a battle, 'I may not come back to-morrow. If anything happens, the bow and the

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<sup>11</sup> P. E. Goddard: *Hupa Texts*. University of California Publications. American Archæology and Ethnology, Berkeley, Vol. I., 1903-4, pp. 123, et seq.

<sup>12</sup> E. Sapir and R. B. Dixon: *Yana Texts*. University of California Publications in American Archæology and Ethnology, Berkeley, 1910, p. 213.

<sup>13</sup> J. Curtin: *Creation Myths of Primitive America*, Boston, 1898, p. 300.

quiver and all that are with them will fall on the bed. You will know then that someone has killed me. But a child will rise from the spittle which I have left near the head of the bed ; a little boy will come up from the ground '. In the middle of the fourth night the grandmother heard cries from the ground near the place where Tsawandi Kamshu slept : a new-born child was crying, rolling, struggling, wailing. The old women went to the spot whence the cries came and found the babe covered with dirt, mud and ashes. . . . ' I don't think anyone brought that baby into this house ', said she to herself, ' Tsawandi Kamshu said that a baby would rise from his spittle. Maybe this is his spirit that has come back and is a baby again '.

The same power is inherent in the blood, as we know from the Greek myth of Creation ; and likewise in tears, nasal mucus and the vaginal secretion.

For instance, in Boas' <sup>14</sup> collection there is the following story : A daughter was stolen away by a forest-spirit, and her ten brothers, who tried to set her free, were killed by him. The mother wept night and day, and her tears and nasal mucous ran down upon the earth. One day she noticed that the mass was beginning to move and take human form. She wrapped the little creature in cedar-bark ; it became a man-child and she called it Anthine.

How did this power come to be attributed to these human excretions ? When primitive man began to puzzle himself about the dead, the question occurred to him : ' What is it that is lacking in this body which has changed so suddenly and completely ? ' And the answer was : ' Excrement, urine and spittle and very likely also blood '. In these things he felt that life must reside. At first all the excretions of the body were thought to possess only the properties of the living man, so that they could assume his form. There was no distinction between them and they appeared all to have the same powers. Later, in the logical development of primitive thought, they were also endowed with the capacity to produce new living beings.

In this primal stratum of mythology there are as yet no gods ; as mythology evolved further, spirits and demons begin to play a part, but the actual gods only appear in a much later cycle of myths. Even when this advanced stage is reached, however, the belief in the genesis of new living things without any question of impregnation is at first firmly adhered to. For instance, in Mexican and Germanic legends,

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<sup>14</sup> Boas, p. 117.



we meet with the idea of the Kingdom of the Children. This fairyland is regarded as man's original home and is symbolized by a *broken tree*, from whose wound blood is flowing. Its name is derived from *temo* = 'to descend' and thus means 'the house of descent' or birth, and those who descend are the children. And, since amongst many races the spirits of the new-born are thought to come forth from trees, the broken, 'streaming' tree represents the whole of Paradise, which originally was a vast forest. Hence are derived the other names borne by this wonderland: 'The place where children are made' (tlacapil—cachiualoya) or 'The place where the flowers are' (Xochitcalpan). Here, too—as in the case of the Germanic myths—lived the souls of the dead, especially of warriors, who appear in the guise of kotingas, colibri and butterflies. From this kingdom, too, come the gods. Thus, there is a song of the Mexican maize-god which runs as follows:

' The maize-god is born  
 In the House of Descent,  
 Out of the place where the trees stand,  
 The Maize-god is born.  
 Out of the place of rain and mist.  
 The place where the children of men are made,  
 Out of the place where they fish for precious stones '.

Now it is very interesting to see how, very gradually, the idea of impregnation creeps into these early myths in which without any such process new beings are produced from the bodily excretions or come down from Paradise. At first, however, the function of the sexual organs does not come in at all. But once the idea of impregnation makes its appearance it is obvious that man's efforts to penetrate the mystery of procreation have progressed considerably.

The Kice tribe in Guatemala have the following legend<sup>15</sup>: 'When Hun hun aphu was slain, his head was placed amongst the branches of a tree at the beginning of the path. From that time on the tree bore fruit. A maiden heard this and went to look at the wonder and was amazed at the fruit. Then the head of the dead man spoke from amongst the branches and said: "These round things amongst the branches are but the skulls of the dead. Dost thou desire them?" "I do", replied the maiden. "Then stretch out the tip of thy right hand". She did so and the skull let its spittle fall down upon her hand, and the spittle swiftly vanished away. But the maiden conceived and after nine months she brought forth twins '.

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<sup>15</sup> Pohorilles: *Das Popol Wuh*, 29-30.

Here is another example <sup>16</sup>: Two mythical disputants discuss the question of whether they are immortal or mortal. Thereupon Noak'ana and Masmasala'miq determine to die and be reborn as children. They ascend to heaven and turn into blood-droplets which the wind carries down to the earth. In their sleep women inhale these drops, with the result that they all bear children. Thus Noak'ana and Masmasala'miq come back to earth.

We have already seen how Zeus impregnated himself before he gave birth to Pallas Athene from his head and how Ra begat with himself before he brought forth the god Schu and the goddess Tefnet by spitting. But these examples belong wholly to a later myth-cycle, not to the *primal* mythological stratum, in which there are no impregnations and no gods. This evolution in mythology is entirely analogous to the evolution which takes place in the ideas of children in our civilized world. Our children too believe, in their earliest years, when they know nothing of the father as procreator and dreaded authority, that they can bring children into the world by the act of defecation. Sometimes, as Abraham <sup>17</sup> has shown, the creative power of *fæces* and urine is manifested in our dreams.

As all the early phases of development which our children go through can be matched in the customs and views of contemporary primitive societies, it should be possible to shew that some few primitive tribes at the present day still know nothing of the significance of coitus for the reproduction of the race. It is not difficult to do so. Amongst the tribes who have the social institution called by Bachofen 'mother-right', or by ethnologists nowadays, more correctly, 'uncle-right', there is, almost universally, complete ignorance of the connection between sexual union and conception. Mother-right is still prevalent to-day in most of Central Africa, part of East Africa and certain parts of Australia, although of course in some places where it exists the above connection is already known. In the family based on this institution, the uncle—i.e. the mother's brother—has the rights, duties and authority which in our families belong to the father. He has to look after his sisters and, at his death, his property goes not to his own children (for being unable to impregnate, he has none) but to those of his sister who issued as he did from the body of their common

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<sup>16</sup> Boas, p. 214.

<sup>17</sup> 'The Narcissistic Evaluation of Excretory Processes in Dreams and Neurosis' (1920), *Selected Papers on Psycho-Analysis*.



mother. In these tribes the person whom we call the father is only the lover of the woman with whom he lives and the playfellow and friend of her children, who—let me emphasize this again—have come into the world quite without any co-operation on his part. The most thorough study and most detailed description of these conditions are to be found in a work by Bronislow Malinowski (recently published in German form), entitled : *The Sexual Life of Savages in North-Western Melanesia*. Let us see how the Melanesians of New Guinea picture impregnation :—After death the spirit wanders to Tuma, the Island of the Dead. Here it lives eternally and can constantly rejuvenate itself. When it is tired of doing so, it wants to return to the earth ; it leaps back in age and becomes a little, unborn child, which drifts about on the water and finally attracts notice by its cries. These rejuvenated spirits, the little, preincarnate children or spirit-babies, are the only source of new life for the race of man. A pre-born child finds its way back to the Trobriand Islands in New Guinea and into the womb of some woman, who must, however, belong to the same clan, or sub-clan, as the spirit-child itself. Every child born into the world has first come into existence in Tuma through the metamorphosis of a spirit, and the activities of the spirits are the only reason and the real cause of every birth. The spirit-baby must have the help of an older spirit in order to get into the mother's body. This other spirit takes it and puts it on the mother's head, in her hair, whereupon she suffers headache, vomits and has an ache in the belly. Blood streams from her body to her head, and the child is gradually carried downwards in the blood-stream till it comes to rest in the mother's womb. The blood helps to build up the child's body and nourishes it. This is why, when a woman is pregnant, her menstruation ceases. Now she is really pregnant and says : ' Already it (i.e. the child) has found me ; already they (i.e. the spirits) have brought me the child '. Often a woman tells her husband which spirit has brought the child, and then tradition preserves the story of this spiritual godfather or godmother. According to another version, the spirit-baby, when it is floating about in the water, may slip into the mother's body, when she is bathing, by way of the vagina or the skin of the abdomen. Then the spirit of a maternal kinsman appears to the woman in a dream. This idea conforms with the knowledge that a virgin cannot conceive, because her vagina has not been opened yet. The thought of conception as the result of sexual union is so remote from the minds of the Trobrianders that a native who has been away from home for a long time is highly delighted if his

wife bears him one or two children in the interval, and full of joyful emotion, he will 'take them in his arms' as his own. This is his social function: he has to protect, care for and play with the child.

When a man of the Trobriand tribe has sexual relations with a girl and she conceives, he puts her away, because it is improper for an unmarried girl to have a child. But he does not do so because he has any idea that she could have conceived from him or any other man. If he assumed that she might have conceived from him, he would probably marry her full of delight. In coitus the sperma plays only the same part as the woman's secretion: it serves to enhance the pleasure. Contraceptives of any sort are unknown, and there is not the faintest idea that such things might exist.

This ignorance is exhibited in the whole behaviour of the South Sea Islander. His domestic animals, i.e. his pigs, are the most valuable of highly prized members of his household. And if his genuine, earnest convictions are clearly manifested anywhere, it is in his care for the well-being and quality of his domestic animals. He is particularly set upon having specially fine, strong and healthy pigs, of a good breed, and he differentiates the treasured, tame village-pig from the despised bush-pig. A Trobriand native will give ten of his own village-pigs for an imported, highly-bred European one. And yet they calmly let their tame female pigs roam about on the outskirts of the village and in the bush, where they pair freely with the male bush-pigs. On the other hand, all the male village-pigs are castrated in order to improve the quality of the meat, in ignorance of the fact that impregnation is necessary for reproduction. Thus all the offspring are of course descended from the wild boars in the bush and so the breed constantly deteriorates again. Yet the natives have not the remotest suspicion of this state of affairs.

The same complete ignorance of the dependence of conception on cohabitation is displayed by those Australian tribes who practise the so-called '*mika* operation' or subincision of the penis. As the urethra is slit open on the underside, ejaculation in coitus takes place outside the vagina, so that impregnation only rarely occurs. It has been thought that this was a kind of Malthusian practice, designed to limit an excessive number of children, and that therefore the natives must have known that ejaculation is the cause of pregnancy. But, quite apart from the fact that primitive peoples do not as a rule wish to limit the number of their children, we now know more about this mysterious custom, thanks to the researches of Klaatsch. It appears



that the *mika* operation subserves a kind of homosexual practice, as Klaatsch learnt from some missionaries amongst the Niol-Niol on the north-west coast of Australia. That is to say, the man whose penis has undergone subincision plays the part of the female, in relation to boys not yet operated upon. These boys perform coitus in the artificial opening. In a letter to Klaatsch, dated December 18, 1906, Dr. Roth tells him that amongst the Boulia, in Queensland, the men who have been operated upon are called ' possessors of the vulva '. Since adults play the passive part, we must suppose that this operation is designed rather for the purpose of a kind of sensual gratification than to make up for the lack of women for the young people. This discovery, however, makes the mica-operation one of the best proofs of our thesis. These Australians, amongst whom there is generally a real lack of women and who much desire to have children, let the ejaculation go to waste for the sake of sensual pleasure, just because they do not know that the former is the cause of pregnancy.

It may be asked whether we may assume that the South Sea Islanders have an *unconscious* knowledge of facts about the sexual life which to us, after many thousand years of cultural development, seem perhaps self-evident. Malinowski has however investigated the subject very thoroughly, for several years, and there can be no doubt that we are not here dealing with the repression of knowledge once possessed. It is true that there is clearly a tendency not to accept this knowledge from Europeans, because it would upset the natives' whole social structure, and primitive man is generally very conservative. Against the arguments of Europeans, and especially of missionaries who try to force on him their dogmas about God the Father and God the Son (which in a father-less community are meaningless) the native advances a number of forcible counter-arguments. For instance, he points out that from early childhood the boys and girls of his people practise free sexual intercourse, and yet (for reasons of which we are as yet ignorant) illegitimate children are very rarely born. Or again, that there are very many married women who for years cohabit with their husbands and yet never conceive ; that there are women who live with one white trader after another and never have a child, etc., etc.

Again, it is made clear by the myths of the Melanesians that they know all about the necessity, for conception, of previous opening of the vagina, but not of coitus. And myths, according to our view, manifest the innermost convictions of a people in the most unconcealed form. Thus there is a legend of the Island of Vakuta, according to

which the first ancestress of a sub-clan exposed her body to the falling rain and so by mechanical means lost her virginity. In the most important Trobriand myth a woman named Mitigis or Bolutukwa, mother of the legendary hero, Tudava, lived all alone in a grotto by the sea-shore. One day she lay down in her cave, under a dripping stalactite, and went to sleep. The drops of water penetrated her vagina and robbed her of her virginity. In other legends of the genesis of man it is not mentioned how the hymen is pierced, but it is often explicitly stated that the mother of mankind had no husband (and could have had no sexual intercourse).

If we take another field of mythology—the legendary reports of still existing countries in the far North—we come upon the wonderful land of Kaytalugi, inhabited solely by sexually rabid women. So brutal and shameless are they that they kill by their excesses any man whom some rare chance brings to their shores. Even their own male children never reach maturity, for they are slowly tortured to death by sexual abuse before they can do so. Yet these women are very prolific and bear many children, male and female.

What is the relation between father and son in this father-less society? Let us consider for a moment the position of the father and bread-winner in our own society, especially in socially inferior strata, and in particular before the separate ownership of property between man and wife was legalized. Upon the father, the master of the house—upon his temper, his health and his capacity for work—the physical and mental weal and woe of his wife and children depended; the family had to consider him, his moods, his demands, reasonable and unreasonable. At his own sweet will he could be beneficent or domineering to them, and he could also cast them off or bequeath to them such part of his property as he pleased, just as seemed good to him. His wife and children had to court his goodwill, look after his comfort, keep him in a good temper and honour him as the paramount authority and the owner and winner of all material goods. Outside the family: at school, in business, in the early manual labour so often imposed on the children of peasants, it was the father who, either in person or by his indirect authority or through some representative, exercised power; in the higher social classes it is in this period that that most important process takes place by which the conscious notion of paternal authority and the father-ideal comes to be formed. The child now begins to understand what, earlier, he only felt and guessed, namely, the firmly established authority of the father as head of the family and



his economic importance. The notion of his ideal infallibility, wisdom, justice and power is, by different stages and in various ways, generally implanted in the child's mind by his mother or nurse during his religious or moral training. Now it is not easy for anyone to sustain the rôle of an ideal, and to do so in the intricacy of everyday life is indeed a hard task, especially for anyone whose temper and whims are not restrained by any discipline. Thus the father-ideal is hardly formed before it begins to crumble. At first the child feels only an undefined discomfort at his father's bad temper or weakness, fear at his anger, and a dull sense of injustice and possibly some feeling of shame when a really bad outburst takes place. Soon the typical attitude to the father emerges, full of conflicting affects, a mixture of reverence and contempt, love and dislike, tenderness and fear.

In the father-less society we have quite a different picture. The wife's attitude to her husband is by no means submissive. She has her own property and her own sphere of influence, private and public. Although, on her marriage, she goes to her husband's village, it is not he who is in the main responsible for her physical welfare—but her brother, who, however, in consequence of a strict taboo between brother and sister, has no authority over her. With these people, according to our ideas, the husband only plays in his wife's house the part of a welcome and respected friend or guest, who takes an affectionate and comradely interest in her children. The children never see their mother intimidated and oppressed by their father. He plays his part only as long as they need an older playfellow. In the relation of the sons to their mother's friend there is no trace of the ambivalence so familiar to us, and, conversely, there is none in his feeling towards them. The mother is at liberty to suckle her son for as many years as she chooses and she weans him very gradually. She may lavish tenderness upon him until he leaves the family circle, at about the age in which our children go to school, and begins to roam with his boy and girl companions far beyond the village.

All the children may indulge in genital activities at their will and pleasure, without ever encountering any prohibitions. So-called 'indecencies', such as our children practise in secret, e.g. anal games, mutual exhibitionism, etc., are unknown. At this period, as before, the father remains the children's friend who helps and teaches them what suits them and for as long as it suits them. It is true that at about this time the children's interest in him diminishes and they generally prefer their little companions. But their mother's friend

continues to be their helper and adviser, half playfellow and half guardian. It is not till later in life that the boy is confronted with the principle of tribal rules and of authority, of subjection to constraint, and to the prohibition of certain desirable things. But these rules and this constraint are embodied in quite another person than the father, namely, in the mother's brother, who lives in another village and belongs to another clan. He is the male head of the family in the matriarchal society. It is he who actually wields the *potestas* and wields it very extensively. He instructs the boys in the skill and virtues of the adult male, he implants in them the ideals of the clan and teaches them to revere the virtues of their ancestors; he is respected and feared; he is the ideal of the adolescents and, later, he bequeaths his property to them. In relation to him that ambivalence develops which, in our civilization, is typical of the son's relation to the father. In place of the father-complex with which we are familiar there arises a marked uncle-complex.

Both in the social life and in the folklore of this primitive people their particular repressions are manifested in unmistakable forms. Sometimes the passions, ordinarily restrained within the traditional bounds by strict taboos, customs and legal punishments, break out in crimes, perversions, aberrations, or one of those dramatic incidents which from time to time convulse the life of a primitive community. Then these passions reveal hatred of the mother's brother or incestuous wishes towards the sister, who, as I have said, is strictly taboo. The folklore of these Melanesians too reflects the matrilinear complex. If we examine myths, fairy-tales and legends we find breaking through in these stories—built up on the model of day-dreams and dictated by suppressed wishes—the repressed hatred for the maternal uncle which is usually concealed under conventional respect and tribal feeling. In some primitive communities, for reasons of mental hygiene, provision is made for the uncle-complex by allowing the nephew once a year completely to destroy his uncle's plantations.

The original belief in impregnation by supernatural agencies has maintained itself in numerous customs among many peoples who have long known about the process of conception. The clearest instance is the institution known as 'nights of chastity'. The original object was by means of fasting and especially of sexual abstinence to move the deity to impregnate the woman. By fasting and with the help of a variety of objects and the rites associated with these, the spirits of fertility or various deities were to be influenced to do this part in the



impregnation of the woman and to ward off evil influences. The fertilizing objects which were at this time placed between or above a newly-married pair retained in fact later only the meaning thus acquired: they became symbols of separation. We can distinguish two kinds of nights of impregnation, corresponding to the different ideas held as to the abode of the fertilizing spirits. In the first, the bride and bridegroom repair to their sleeping-place, set up a fertilizing utensil or await impregnation from without, while, in the second, they are not permitted to go to their couch but have to sleep wherever the spirits of the house or the field are in any case supposed to be present, e.g. by the hearth, in the cellar, in the stable (by the dung-heap), in the woods or the fields. Amongst the Esthonians sexual intercourse is freely practised by the young people before marriage.<sup>18</sup> In the Island of Moon, inhabited by this race, girls enter freely upon sexual relations as soon as they are confirmed; in fact, the more lovers a girl has the greater is her mother's pride, and the honour in which she is held. Thus, here again, there is no question of sexual abstinence on moral grounds. But *after* marriage the nights of abstinence play a great part. In some parts of the Dorpat region inhabited by the same race, young married people are not allowed to share the same bed at all until the first child has been born. Till then they sleep in the stable in winter and the hay-loft in summer. In earlier days amongst the Esthonians the young married people used to be put into a 'marriage-sack' and placed on the dung-heap in the stable to sleep. We can see plainly here how belief in impregnation by demons still makes itself felt, in our own day and amongst people belonging to our own civilization. Where the belief still carries a great deal of weight, complete sexual abstinence is imposed for some time after marriage. Among the Australian tribe of Euahlagi, the bridegroom sleeps for a month on one side of the fire and the bride on the other. Amongst the people of India the custom is for husband and wife to lie on the ground and preserve their chastity for three nights after marriage, to keep up the bridal fire and to eat unsalted food. In New Pomerania a girl has to live a hermit's life for several months before she marries. In Mexico bride and bridegroom have to observe a four months' fast and refrain from intercourse for that period. In China the custom of these nights is specially marked in the province of Kwangtung; here, at the end of the wedding-feast the bride goes back to her parents for three

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<sup>18</sup> According to a communication by Reitzenstein in 1909.

years, during which period she may visit her husband's parents but not himself. In many parts of Germany, too, the custom of the so-called nights of chastity after marriage still persists to-day.

We have seen how profound is the importance for the relation between father and son of the knowledge or ignorance of the connection between cohabitation and conception. If Goethe is right when he says: 'Though the world as a whole advances, the young must nevertheless always begin again at the beginning and, as individuals, pass through the epochs of civilization', then we should be able to recognize in the individual development of our children this period of sexual ignorance, in which there is no Œdipus complex. Our analyses, I think, are always shewing us again that the development of a child is materially influenced by the birth of a brother or sister. We know that the jealousy of the elder children is very marked and is never wholly overcome. Perhaps we have not always noted sufficiently carefully in our analyses that this is when children begin to divine that their father and mother can do something that they themselves cannot, namely, can produce children together. I am almost inclined to believe that the child's jealousy of the parent of its own sex is due less to the idea of pleasurable sexual union than to envy of the capacity to beget and give birth to children.

The son's wish to caress and be caressed by his mother is easier to find in analysis than the wish to have a child by her. This is more deeply repressed and certainly carries with it a stronger sense of guilt. The position with the daughter is similar. Let us refer to a case-history familiar to us all—Freud's *Analysis of a Phobia in a five-year-old Boy*.<sup>19</sup> In the first years of his life 'little Hans' was a natural, cheerful and bright child, whose infantile sexuality and interest in both sexual and excretory processes appeared in the typical way, as did his amorous feelings towards his mother and his girl playmates. His love for his father was quite unmistakable. An attempt on his mother's part to deter him from his infantile sexual play by fear showed at first no sort of consequences. We may see how significant a part was played by the birth of a sister in the genesis of the process of repression in the little boy. Freud says <sup>20</sup>: 'The most important influence upon the course of Hans's psycho-sexual development was the birth of a baby sister when he was three and a half years old. That event accentuated

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<sup>19</sup> Freud: *Collected Papers*, Vol. III, pp. 149 *et seq.*

<sup>20</sup> *Ibid.*, p. 255.



his relations to his parents and gave him some insoluble problems to think about ; and later, as he watched the way in which the infant was looked after, the memory-traces of his own earliest experiences of pleasure were revived in him. This influence, too, is a typical one : in an unexpectedly large number of life-histories, normal as well as pathological, we find ourselves obliged to take as our starting-point an outburst of sexual pleasure and sexual curiosity connected, like this one, with the birth of the next child '.

We learn that the child had rightly divined the process of pregnancy and had woven many phantasies around it. In another passage Freud says <sup>21</sup> : ' It is easy to see that Hans's enjoyment of his phantasy was interfered with by his uncertainty as to the part played by fathers and by his doubts as to whether the begetting of children would be under his control '.

And again <sup>22</sup> : ' Hans had learnt from experience how well off he could be in his father's absence, and it was only justifiable that he should wish to get rid of him. And then Hans's hostility had received a fresh reinforcement. His father had told him the lie about the stork, and so made it impossible for him to ask for enlightenment upon these things. He not only prevented his being in bed with his mother, but also kept from him the knowledge he was thirsting for '.

The case-history shows that, in spite of all his brooding over the question of the part played by his father in the genesis of the little sister, Hans could not find the answer. And how did the enlightened father versed in analysis behave in this matter ? He inexorably withheld the knowledge from Hans and did not carry the analysis through in this direction. Perhaps this was the very reason why Hans had to repress the whole, incomplete analysis. His father was the typical father of patriarchal society, exercising his *potestas* in such wise as to withhold quite consistently from his son knowledge which appertains to him alone, although he was sincerely trying to free Hans from all his doubts and brooding.

Children in our civilization acquire only very slowly the knowledge of the different processes in the sexual life of their parents and the Œdipus complex develops but gradually in the course of the first years of life. Yet our analytic work shews us that as the result of

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<sup>21</sup> Freud : *Collected Papers*, Vol. III, p. 234.

<sup>22</sup> *Ibid.*, p. 275.

many thousands of years of evolution, it appears to have become a hereditary possession of our world. For, even in cases where patients have never known their father or mother, analysis always brings out again that in their unconscious the typical Œdipus complex can be uncovered.



# THE CHARACTEROLOGICAL MASTERY OF THE ŒDIPUS COMPLEX<sup>1</sup>

BY

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Psycho-analytical investigation is in a position to provide the scientific theory of character with radically new points of view and with new results based on these. It is enabled to do this in virtue of three characteristics: its theory of unconscious mechanisms; its historical approach; its grasp of the dynamics and economics of psychic processes.

Because psycho-analysis penetrates beyond the given appearances to their nature and development and grasps the processes of the 'deep personality' in horizontal and vertical cross-section, it automatically opens the way to the ideal of the scientific study of character: a 'Theory of Genetic Types'. Such a theory would not only give us scientific understanding of human modes of behaviour, but also insight into their specific developmental history. The transfer of character-study from the category of so-called 'mental science' in Klages' sense to that of the natural science of psychology is, in itself, no small service.

But the clinical investigation of this field is not simple, and we need first of all to get clear as to the facts to be studied.

## I

As is well known, psycho-analysis marked out from the start new paths of its own in character-investigation. Freud<sup>2</sup> opened up a new field in his first discovery, that certain traits of character can be explained historically as modifications and developments of primitive instinctual trends caused by environmental agencies; that, for example, parsimony, pedantry, and love of order are the offspring of anal-erotic instincts. Later, Jones<sup>3</sup> and Abraham<sup>4</sup> in particular have

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<sup>1</sup> Read at the Conference of the German Psycho-Analytical Society, Dresden, September, 1930.

<sup>2</sup> Freud: 'Character and Anal Erotism (1908)', *Collected Papers*, Vol. II, p. 45.

<sup>3</sup> Ernest Jones: 'Anal-Erotic Character Traits', *Papers on Psycho-Analysis*, 3rd ed., 1923, p. 680.

<sup>4</sup> Abraham: 'Psycho-Analytical Studies on Character-Formation', *Selected Papers*, pp. 370 *et seq.*

radically enriched characterology by tracing back character traits to their basis in infantile instinct (e.g. envy and ambition to urethral erotism). These early attempts were concerned with the explanation of the *instinctual basis* of isolated typical character traits. But the problems arising from everyday therapeutic practice require something more. We must decide either to attempt to understand the dynamics, economics and history of *character as a whole*, both generically and in its typical modifications, or to give up hope of influencing all the cases, by no means rare, in which the aim must precisely be the removal of the basis of reaction of a neurotic character.

Starting from the clinical fact that the character of the patient, in its fundamental aspect as a typical mode of reaction, is made to serve the resistance against uncovering the unconscious (*character resistance*), I have been able to show in earlier studies <sup>5</sup> that this rôle of character during treatment mirrors its genesis. The occasions which, in treatment and in ordinary life, call up a person's typical reaction, are just those which originally conditioned his character-formation and led to the maintenance and fixation of the reaction once set up, so that it became as it were an automatic mechanism.

The main thing, then, is not the content and peculiarity of this or that character trait, but rather the purposive mode of operation and genesis of the typical reaction as such. While hitherto we have chiefly been able to understand and to explain genetically the content of experience and neurotic symptoms and character traits, we are now arriving at the solution of the *formal* problem, the problem of the particular *way* in which a person experiences and in which neurotic symptoms are produced. I think we are justified in assuming that we are clearing the way toward an understanding of what may be called the *fundamental trait of any personality*.

Popular thought classifies human beings as hard or yielding, proud or meek, cool or warm, aloof or hot-blooded. Psycho-analysis of these different types of character can prove that they are all only different forms of *armouring of the ego* against the dangers of the external world and against the repressed instinctual demands of the id. The excessive politeness of one hides the same anxiety as functions through the harsh and sometimes brutal behaviour of another. Only

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<sup>5</sup> 'Über Charakteranalyse' (1928); 'Der genitale und der neurotische Charakter' (1929); both *Internationale Zeitschrift für Psychoanalyse*; 'Character Formation and the Phobias of Childhood', this JOURNAL, Vol. XII, 1931.



their differing histories have determined that the one discharges, or tries to discharge, his anxiety in this way and the other in that. When the clinical psycho-analyst speaks of passive-feminine, paranoid-aggressive, obsessional-neurotic, hysterical, genital-narcissistic and other characters he has laid hold, through this nomenclature, of different reaction-types, in a somewhat rough scheme. What is needed now, however, is both to grasp the common nature of all character-formation as such, and also to give some account of the fundamental conditions which lead to such typical differentiations.

We propose in this paper to set forth the common factors in the formation of character, and to indicate some known differentiating mechanisms by way of examples.

## II

First we must enquire what leads to character-formation. To do so, we must recall some of the properties common to all characterological reactions which I have described in detail elsewhere. Character consists in a *chronic* change of the ego, which may be described as a *hardening*. This change is the real basis of the chronic nature acquired by the reactions characteristic of a personality. Its object is the defence of the ego against external and internal dangers. When it has already become a chronic defence-formation, it deserves to be called 'armour'. It clearly involves limitation of the psychic mobility of the whole person. This limitation is mitigated by non-characterological, i.e. atypical relations with the external world, which seem like communications that have remained open in an otherwise closed system. They are the 'chinks' in the 'armour' by which libidinous and other interests may be extruded and retracted, like pseudopodia, according to the situation. But the armour itself is to be pictured as flexible. Its mode of reaction follows the pleasure-pain principle throughout. In painful situations the armour is augmented; in pleasurable ones it becomes looser. The degree of characterological mobility, the capacity to open or close to the outer world according to situation, constitutes the difference between neurotic character-structure and one fit to cope with reality. The obsessional character with its suppression of affect, and the schizophrenic autisms which lead toward catatonic rigidity, impress one as being prototypes of a pathologically rigid armour.

The characterological armour has been produced by long-continued clash between instinctual demands and the thwarting outer world, and draws its force and sustained vindication from current conflicts between

these two. It is the expression and the sum of those influences of the external world on the instinctual ego which, by aggregation and qualitative sameness, form a historic whole. That is at once apparent when we think of such familiar character types as 'the citizen', 'the official', 'the working-man', 'the butcher', etc. The region in which the armour is formed is the ego, precisely that border-region of the personality which lies between bio-physiological instinct and the outer world. We may therefore designate it as the *character of the ego*.

At the beginning of its *definitive* formation we regularly find in analysis the conflict between genital incest-wishes and the frustration, by reality, of these desires. *Character-formation is initiated as a particular form of mastery of the Œdipus complex*. The conditions which determine that the mastery shall take just this form are special ones; they are in effect specific for character. (These conditions hold good in the prevailing social situation to which infantile sexuality is subjected. Change of this situation will lead to change in the conditions of character-formation and accordingly in character-structure.) For there are also other ways of dealing with the complex, though not so important and not determining to the total future personality, such as simple repression or formation of an infantile neurosis. Consideration of these conditions shews as their common feature extremely intense genital wishes and an ego as yet relatively weak, which first of all secures protection from fear of punishment by means of repressions. The repression leads to a damming-up of impulses, but as the result of this the repressed instincts threaten to break through the simple repression. That leads to a change in the ego, such as the formation of attitudes of apprehensive avoidance, which may be summed up under the term shyness. Though not yet constituting a characterological trait, but only a tendency in that direction, this nevertheless has consequences which are important for character formation. Shyness, or a similar ego-attitude, strengthens at the same time as it limits the ego; for it defends the latter from dangerous situations which tend to call up the repressed.

But it appears that this first change in the ego, let us say shyness, does not suffice to master instinct: on the contrary it leads readily to development of anxiety and is a regular basic attitude underlying infantile phobia. To maintain the repression, a further change in the ego is necessary: the repressions *must be firmly cemented*, the ego must *harden* and the defence must assume an established, automatic character. And as the parallel development of infantile anxiety represents a



constant threat to the repressions, as in anxiety the repressed finds expression, as moreover anxiety itself threatens to weaken the ego, defence against anxiety must also be formed. The fundamental motive behind all these measures taken by the ego is in the last resort fear of punishment, conscious or unconscious, a fear which is of course kindled afresh each day by the current real behaviour of parents and teachers. So we have the apparent paradox that out of anxiety the child tries also to get rid of anxiety.

The hardening of the ego necessary from the point of view of libidinal economics is effected by three main processes :

The ego identifies itself with the reality which frustrates desire, in the person of the principal agent of frustration.

It directs against itself the aggression which it mobilized against the frustrating person and which itself produced anxiety.

It forms reactive attitudes against the genital impulses, by taking their energy from the id and employing it in its own interest.

The first process fills the defensive shell with significant contents. (The suppression of affect of an obsessional patient meant : ' I must control myself, as my father was always preaching ' ; but also, ' I must secure my pleasure, and indurate myself against my father '.)

The second process binds perhaps the most important portion of aggressive energy, walls up some of the motor-energy and thus creates the element of inhibition in the character.

The third withdraws certain quantities of libido from the repressed libidinal impulses, so that they are less able to force their way through. This change is later not only nullified but reversed by the increase of the remaining energy-cathexes consequent upon limitation of motor activity and of capacity for satisfaction.

The armouring of the ego is therefore induced by fear of punishment at the expense, in energy, of the id, and with a content constituted by the prohibitions and the model of the educator. Only thus can character-formation solve its economic problem of reducing the pressure of the repressed and of strengthening the ego over and above this. But the whole process also has a reverse side. If the internal results of the defence are, at least for a time, successful, it involves at the same time a more or less extensive exclusion both of external instinct-stimuli and of further educational influences. This does not necessarily preclude a superficial submissiveness, apart from gross cases of development along lines of defiance. Moreover, we must not overlook that superficial submissiveness, such as that shewn by the

passive-feminine character, may be combined with adamantine inner resistance. It should be emphasized here that the defensive armour is formed in the one case on the surface, and in the other in the depths of the personality. In the latter case what is visible is not the real but the ostensible personality. As example of surface armouring I may quote the obsessional character, and its suppression of affect, and the paranoid-aggressive character; the hysterical character exemplifies the deep defence. The depth of the defence depends upon conditions of regression and fixation which cannot be more fully discussed here, and forms one of the detailed questions of the problem of character-differentiation.

### III

If on the one hand the characterological armour is a *consequence* and *specific mode* of resolution of the infantile libido-conflict, on the other it constitutes in a majority of cases, under the conditions which rule character-formation in civilized communities such as ours, a *foundation* for later neurotic conflicts and for neuroses expressed in symptoms: it becomes the *basis of reaction of the neurotic character*. Having described elsewhere<sup>6</sup> in detail the process of exacerbation of the basic mode of neurotic reaction into neurosis expressed in symptoms, I give here a summary only.

A characterological structure of the personality which does not permit the establishment of an ordered sexual economy is the preliminary condition of a later neurotic illness. Thus the main cause of illness is not to be sought in the Œdipus-complex itself, but in the manner in which it is resolved. But since this is itself determined in a far-reaching way by the character of the family-conflict (intensity of fear of punishment, breadth of bounds set to satisfaction of instinct, character of parents, etc.), it is in the last resort the development of the ego of the small child up to the Œdipus phase and within it which determines his path either to neurosis, or to an ordered sexual economy as basis of social and sexual potency.

What marks the basic reaction of the neurotic character is that it goes *too far* and lets the ego become so rigid that it cannot later achieve an ordered sexual life and sexual experience. This prevents the unconscious instinctual drives from discharging any energy and brings about not only the permanence, but the constant increase of the

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<sup>6</sup> 'Der genitale und der neurotische Charakter', *Internationale Zeitschrift für Psychoanalyse*, Bd. XV, 1929.



dammed-up sexuality. Its first consequence is seen in a continual growth of characterological reaction-formation against sexual demands, formations which take shape in connection with present conflicts in important situations in life. Thus, as in a regular cycle, the damming-up is increased, and this in turn leads to new reaction-formations, quite in the manner of the prelude to a phobia. But the pressure increases faster than the growth of the defensive armour, until at last the reaction-formation is no longer equal to the psychic tension. Now the repressed sexual wishes begin to break through, but are at once ward off by symptom-formation. (Formation of a phobia or of its equivalent.)

In this neurotic process the various defence positions of the ego overlies and interpenetrate one another. We then find side by side in the cross-section of the personality characterological reactions which belong historically to different periods of development. In the phase of final collapse of the ego, this cross-section resembles a tract of land after a volcanic eruption which has jumbled together rocks of different geological strata. But in this confusion one soon finds the leading motive and principal mechanism of all characterological reactions, which, once observed and understood, lead directly to the central infantile conflict.

#### IV

What distinctive conditions can we already recognize to-day for the establishment of a healthy defensive armour as against a pathological one? Our investigation of character-formation remains sterile theory as long as we do not give some concrete answer which will supply clues for education. The answer is certainly one which, in our present sexual dispensation, will embarrass those educators who wish to train healthy human beings.

In the first place, we must again emphasize the fact that character-formation does not depend upon the mere existence of the clash of instinct and frustration, but upon the *way* in which this occurs, the time at which the character-forming conflicts set in, and the instincts concerned.

With a view to preliminary orientation let us arrange the multitude of conditions in a scheme. We shall then have before us the following possibilities in principle.

The result of the process of character-formation depends upon :

The time at which instinct meets with frustration ; the quantity and intensity of the frustration ; the instincts which experience the

central frustration ; the relations of indulgence to frustration ; the sex of the principal frustrating person ; the inconsistencies in the frustration itself.

The aim of a future prophylaxis of the neuroses can only be the creation of such characters as can give the ego sufficient hold against external and internal forces, while allowing the sexual and social freedom of movement necessary for the psychic economy. Therefore we must first understand the essential consequence of every frustration of a gratification of the child's instincts.

Every frustration of the kind produced by current modes of training causes a withdrawal of libido into the ego and thus a reinforcement of secondary narcissism. That means a characterological change of the ego in the direction of increase of narcissistic sensitiveness, which may find expression as shyness and increased predisposition to anxiety. Where the frustrating person is loved, as is generally the case, an ambivalent attitude is first developed toward him (or her), which then passes into an identification. The child assimilates, together with the frustration, certain character traits of the frustrating person ; just those traits, indeed, which are directed against the instinct. The essential result, as far as the instinct is concerned, is its repression.

But the *characterological* effect of the frustration varies according to the moment at which it impinges on the instinct. At the *beginning* of instinct-development, frustration effects only too thorough a repression ; the conquest is indeed complete, but the instinct is not now available either for sublimation or for conscious satisfaction. Too early repression of, say, anal-erotism injures the development of the anal sublimations and prepares the way for serious anal reaction-formations. Characterologically more important is the exclusion of instincts from the structure of the personality, with damaging effects upon activity as a whole. One sees this exemplified in children whose aggressive and motor pleasures were inhibited too early.

At the *height* of its development an instinct can scarcely any longer be made to undergo complete repression. In this case frustration can only establish an *insoluble* conflict between prohibition and impulse : when an instinct undergoes sudden and unaccustomed frustration at the height of its development, the ground is prepared for the growth of an 'instinct-ridden' personality.<sup>7</sup> The child does not fully accept the

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<sup>7</sup> Cf. Reich : *Der triebhafte Charakter*, Internationaler Psychoanalytischer Verlag, Vienna, 1925.

prohibition, but nevertheless experiences a strong sense of guilt, which then intensifies the sway of impulse to the point of obsession. Thus in psychopaths of this type we encounter an unadapted character structure, which is practically the opposite of the armour we have postulated as able to meet inner and outer requirements. It is characteristic of the 'instinct-ridden' person that instinct itself (sadistic impulse, chiefly)—and not reaction-formation against instinct—is employed in defence against imaginary situations of danger, including danger arising from instinct. Since in consequence of the disordered genital structure, the libido economy is devastated, the dammed-up sexuality increases the anxiety and with it the characterological reactions in a way that leads on occasion to excesses of every kind.

The opposite of the 'instinct-ridden' is the inhibited character, a type which includes the hysterical, obsessional-neurotic and depressive characters. Just as the development of the first is distinguished by the antithesis between fully developed instinct and sudden frustration at its zenith, so the inhibited character is marked by the heaping-up of frustrations and other inhibiting effects of education from the beginning until the end of instinct-development. The characterological armour corresponds to this: it tends to rigidity, limits the individual's psychic mobility considerably, forms the basis for depressive conditions and obsessional symptoms (*inhibited aggression*), but—and this is its sociological significance—it turns the individual into a well-behaved, essentially uncritical vassal.

The mode of the later sexual life depends most largely upon the *sex and character of the person who exerted most influence in education.*

We can reduce the very complicated influence of society on the child to the fact that, in an educational organization based on families, it is essentially the father and the mother who act as the chief executive organs of social influence. The sexual attitude, generally unconscious, of parents to their children ensures that each child is more loved and spoiled, i.e. less restricted and educated, by the parent of the opposite sex. Therefore in most cases the sexual relation alone makes the parent of the same sex the chief educator. With the qualification that in the first years of life and among the mass of working people, the relation is shifted in favour of the mother as educator, we can say that the identification with the parent of the same sex is the cardinal fact. Thus the daughter develops a mother-like ego and super-ego, and the son develops a father-like ego and super-ego. But special constellations of the family or of the character of the parents frequently lead to



exceptions. We may mention some typical bases of aberrant identifications.

Let us first consider the boy's position. In ordinary circumstances, having developed the simple Œdipus complex, and being more loved and less frustrated by the mother than by the father, he will identify himself with the latter and will develop in the direction of masculine activity, provided the father himself shows an active-masculine character. If, however, the mother was a strict, 'masculine' person, if the most important frustrations came from her, the boy will identify himself predominantly with her. He will thus develop a *mother-identification* on a *phallic* or *anal* basis, according to the erotogenic stage reached when the chief maternal frustration occurred. From the *phallic* mother-identification there usually develops a phallic-narcissistic character, whose narcissism and sadism are directed specially against women (vengeance against the strict mother). This attitude is the characterological defence of the deeply repressed original love for the mother, which could not exist alongside with her frustrating influence and the identification with her, and therefore disappeared in disappointment. More exactly : it is converted into the characterological attitude, from which, however, it can at any time be recovered by analysis.

The mother-identification on an *anal* basis leads to a passive and feminine character, but towards women, not men. Such characters often form the basis of the masochistic perversion, with the phantasy of the strict woman. This character-formation serves mostly as defence against phallic wishes for the mother in childhood, which were very intense although short-lived. There is castration-anxiety *in relation to the mother*, which supports the anal identification with her. Analinity is the specific erotogenic basis of this character-formation.

A passive and feminine character in a man is always due to identification with the mother. But while in the type described above, the mother, as the frustrating educator, is the object of fear evoking the attitude in question, there is a form of passive-feminine character due to excessive *strictness on the part of the father*. Fear of realizing his genital wishes made the boy recede from the masculine-phallic line to the feminine-anal, where he identified himself with the mother and assumed a passive and feminine attitude to his father and, later, to all authority. Exaggerated politeness and obligingness, gentleness, and an inclination to deceptions distinguish this type, whose attitude wards off active masculine desires, and principally the repressed hatred of the

father. Along with his *de facto* feminine-passive bearing (mother-identification in the ego), he has, however, identified himself in his ego-ideal with his father (father-identification in the super-ego and ego-ideal), but always remains, through lack of a phallic position, incapable of realizing this identification. He will always *be* feminine while *desiring to be* masculine. A severe sense of inferiority, resulting from this tension between feminine ego and masculine ego-ideal, sets a stamp of depression, often of abjectness, on him. This receives a rational justification from the severe disturbance of potency which is always present.

Comparing this type with that of the phallic mother-identification, we note that while the phallic-narcissistic character successfully wards off any feeling of inferiority, so that it only betrays its presence to the practised eye, the passive-feminine character bears the open impress of this feeling. The difference lies in the basic erotogenic structure: phallic libido enables the individual to compensate thoroughly for all attitudes which do not correspond to the masculine ego-ideal, whilst anal libido as centre of the sexual structure, in the case of the male, makes such compensation impossible.

In the girl's case, conversely, a father who does little to frustrate her is more likely to contribute to the formation of a feminine character than a strict and brutal father. A series of clinical comparisons shows that the daughter of a brutal father reacts typically by forming a hard, masculine character. Penis-envy, which is always at hand, is activated and takes the shape of a masculinity complex with characterological changes in the ego. In this case a bearing which is aggressively masculine and hard serves as armour against the infantile-feminine attitude to the father, which had to be repressed on account of his indifference or severity. If on the other hand the father was mild and loving, the little girl would be able to retain and even develop her object-love in large measure (omitting the sensual components); identification with the father would not be necessary. It is true that she also would usually have acquired penis-envy; but it would have remained characterologically ineffective because there was comparatively little heterosexual frustration. Thus we may see that the assertion that this or that woman has penis-envy tells us nothing. Everything depends on its characterological and symptomatic effect. The decisive fact in the case of the above type is that in the ego, a mother-identification has taken place. This expresses itself in what are called feminine character traits.

Maintenance of this character-structure requires the addition, very early in puberty, of vaginal primacy, as the lasting foundation of femininity. Severe disappointments in the father or father-figures at this period can cause regression to penis-envy, stimulate the masculine identification which was lacking in childhood, activate the slumbering penis-envy and so lead to a late change of character. We see this so often in girls who repress their heterosexual wishes on moral grounds (identification with the mother and her lower middle-class morality) and thus provoke the disappointment in men which they experience. In most cases such feminine characters tend to develop a hysterical disposition. We then see a perpetual advance of genitality to the object (coquetry), and a shrinking-back, with development of genital anxiety, when matters threaten to become serious (hysterical genital anxiety). The hysterical character in the woman is the defence against her own genital wishes and the masculine aggression of the object.

In our analyses we meet with the peculiar case of severe, hard mothers bringing up daughters who are characterologically neither masculine nor feminine, but who remain, or again become, childish. The mother gave the child too little love and the ambivalence-conflict towards the mother turned mostly to hatred, from the dangers of which the child withdrew to the oral stage of sexual development. It hates the mother in the genital stage, represses the hatred and transforms it, after assuming the oral attitude, into reactive love and a paralysing dependence upon the mother. Such women develop a peculiar limpet-like relation with older or married women, cling to them in a masochistic fashion, tend towards passive homosexuality (if a perversion be formed it is cunnilingus), let older women mother them, develop little interest for men and are marked out all their lives by 'baby ways'. This characterological attitude is, like every other, an armour against repressed wishes and a defence against the stimuli of the outer world. Here the character serves the oral defence against intense hate-tendencies in relation to the mother, behind which, deep down, is to be found—often only with great difficulty—the similarly repressed normal feminine attitude to the man.

## V

So far we have merely considered the fact that the sex of the frustrating educator is of great importance in the shaping of character, and have only touched upon the educator's character in so far as it



exerts a 'stricter' or a 'milder' influence. But the formation of the child's character also depends, in another decisive way, on the character of the parents, and this, again, is affected by special and general social influences. Much that official psychiatry, unable to give any account of the facts, regards as inherited, is shewn by sufficiently deep analysis to be the result of early identifications charged with conflict.

We do not deny that modes of reaction are laid down by heredity. Has not the newly-born baby its 'character'? But we think that the environment exercises the decisive influence. It determines whether a given disposition shall be developed, strengthened, or entirely suppressed. The strongest objection to the view that character is inborn is probably provided by those cases in which analysis has shewn that certain modes of reaction were practised up to a given age, but that thereafter the subjects in question developed characterologically along altogether different lines: thus some who were at first excitable and cheerful, later became depressed; others who began by displaying motor-aggression, later became quiet and inhibited. It is, however, probable that a certain keynote of the personality is fixed at the start and scarcely changeable. No doubt the over-emphasis of hereditary factors rests upon unconscious apprehensions as to the conclusions which a critique of education would draw, if the influence of the latter were estimated correctly.

This question will only be settled finally when some official authority decides to perform a mass experiment by isolating, say, 100 children of psychopathic parents immediately after birth and placing them in a uniform educational environment, with a view to comparing them later with 100 children who have remained in a psychopathic environment.

## VI

A glance at the foregoing sketches of basic character-structure shows that they are all alike in being stimulated by the conflicts of the Œdipus-complex, in settling these conflicts in a peculiar way, and at the same time in maintaining them for the future. We can supplement Freud's dictum, that the Œdipus-complex is destroyed by castration-anxiety, by saying that while the complex certainly disappears it re-arises in another form; it is transformed into characterological reactions which partly continue its main traits in a disguised form, but partly constitute reaction-formation directed against its basic elements.

We can sum up further: the neurotic character is built up as a compromise, not only in its contents but also in its form, just as is the

symptom. It contains the infantile instinctual demand and the defence, which may belong to the same stage or to different ones ; and the infantile nuclear conflict persists—transformed into formal attitudes—in automatic modes of reaction which have become permanent.

By this insight into a portion of human development we are enabled to answer a question which Freud once raised : in what form does the repressed persist ?—as duplicate copy, as memory-trace, or otherwise ? We can now conclude, with all due caution, that those parts of infantile experience which are not elaborated characterologically are retained as memory-traces carrying an affective cathexis, whilst those which suffered the fate of characterological transformation persist as present modes of behaviour. Obscure as the process may still be, this ' persistence as function ' cannot be doubted, for analytical therapy is able to resolve such characterological functions again into their original constituents. We are not concerned with raising something submerged, as, say, in hysterical amnesia, but with a process which might perhaps be compared with the recovery of a chemical element from a compound. Moreover, we now understand more clearly why it is not possible to clear up the Œdipus conflict in many severe cases of character-neurosis merely by analysis of content. The conflict no longer exists at all as a present fact, and can only be recovered by analytic decomposition of the formal modes of reaction. This naturally extends our therapeutic possibilities.

What has just been said applies only to the neurotic character, in which alone the Œdipus *complex* persists in the form described. The genital character, the ideal healthy type, differs from the neurotic just in this, that the Œdipus conflict is not converted into characterological functions, but *settled by withdrawal of energy*. If the chief substance of the libido is satisfactorily invested, partly in sublimations (instead of in reaction-formations), partly in genital attitudes to the object instead of pregenital and sadistic ones—i.e. if psychic interest is in the main turned to reality and real objects—there is no occasion for the formation and maintenance of the rigid chronic modes of reaction seen in neurotic characters. Thus the genital character is flexible in its mode of behaviour, and can as readily armour itself against the outer world where this is necessary, as it can completely open itself in other situations.<sup>8</sup>

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<sup>8</sup> Cf. Reich : ' Der genitale und der neurotische Charakter '. *Internationale Zeitschrift für Psychoanalyse*, Bd. XV, 1929.

This demarcation of ideal types, based on separation of dynamic processes which are specifically pathogenic from those which are specifically adapted to reality, is far from being mere idle theory. It is a conscious attempt to attain, on this basis, a *theory of psychic economics* which may be in a position to propose practical ends for education. It lies with society, of course, to decide whether to make possible and promote, or to refuse the practical application of such a theory of the economics of psychic energy. Present-day society, with its anti-sexual morality and its inability to secure for the mass of its members even the barest subsistence minimum, is as far removed from recognizing such possibilities as it is from their practical application. That becomes clear at once when we point out beforehand that the binding of the child to the parents and the attack on infantile masturbation in the earliest years, the ascetic requirements in puberty and the constraint of sexual interest within the marriage institution (sociologically justified at present) constitute just about the opposite extreme to the conditions required for the production and maintenance of a psychic economy which shall be sexually sound. The prevailing regulation of sex necessarily creates the characterological basis of the neuroses; sexual and psychic economy excludes present-day morality, which is being defended by all available means. That is one of the inexorable social conclusions which follow from the psycho-analytical study of the neuroses.

## VII

In individual psycho-analytical therapy, consideration of the resistances produced by the patient's character (character resistances) helps considerably towards the removal of the neurotic basis of reaction. Our therapy goes beyond causal analysis of symptoms and provides in character-analysis what, in psychotherapy, is rather pretentiously called 'treatment of the total personality'. But it differs essentially from other psychotherapy in changing the total personality neither educationally nor in any other synthetic fashion, but solely by disturbance of the equilibrium of the neurotic character and by interpretation of the purposive operation of the characterological armour. The decisive part is played in the end by the natural impulses to genital pleasure and social activity which the character-neurosis had hindered only from unfolding. The technical process consists in this, that after a part of the characterological behaviour has been understood, it is isolated, presented to the patient and continually objectified. Since



the patient, whilst conscious indeed of his neurotic symptoms, knows nothing of his neurotic mode of reaction, the latter must be objectified before it can be analysed. By this means the patient is enabled to take up the same attitude to his neurotic character trait as to the symptom which torments him subjectively. Character analysis, consisting essentially of this isolation, objectification and interpretation of character, does not take place at the end of the analysis, as a sort of completion, nor as an accompaniment in such cases as shew a specially marked character neurosis, but is indicated in every case, for the following reasons. First, there is no neurosis which is not erected upon a neurotic character; it is not a matter of differentiation between neuroses expressed in symptoms and neuroses expressed in character—we can only distinguish between neuroses of character with and without neurotic symptoms. Secondly, as long as the characterological armour remains intact, it obstructs the therapeutic effectiveness of our analytical interpretations. It is more than an analogy when we say that the interpretations rebound from the character and evaporate, if this itself is not first opened up so as to provide access to the trends protected and warded off by it. In the third place, our argument has already shewn that the most important infantile conflict situations have been transformed into characterological reactions and are therefore not understandable without analysis of attitudes. Finally, systematic analysis of character facilitates direct access to the central infantile conflict.

All this implies no innovation in technique, but only extension in a certain direction, and no part of the old practice is thereby made superfluous. Questions of detail are discussed in my paper 'Über Charakteranalyse.'

But the incidence of the neuroses is so great that individual therapy cannot remain the sufficient aim of practical psycho-analysis. Our task is to determine the criteria of an effective prophylaxis of the neuroses, and to discover how we can prevent the formation of the basis of reaction of neurotic characters. Those are matters for further investigation. But we are already able to see that our education is topsy-turvy and must be set up on its feet, theoretically, by psycho-analytical study of our psychic economy. Only then will society, in so far as it provides itself with the necessary freedom of action, be in a position to draw practical conclusions for application in education.

## CHILD-ANALYSIS IN THE ANALYSIS OF ADULTS<sup>1</sup>

BY

S. FERENCZI

BUDAPEST

I feel that I ought to say a few words in explanation or excuse of the fact that I, a stranger, have been chosen to speak at this celebration of a society that includes so many who are worthy—more worthy than myself—to fulfil this honourable task. It cannot be merely the precedence accorded to those twenty-five years during which I have had the privilege of being in close contact with Professor Freud and under his leadership—for there are amongst you some of our colleagues who have been his faithful disciples even longer than I. Let me therefore look for some other reason! Perhaps you wanted to take this opportunity of giving the lie to a certain statement which is widely current and much favoured by the uninitiated and the opponents of psycho-analysis. Over and over again one hears irresponsible remarks about the intolerance, the 'orthodoxy' of our master. It is said that he will not suffer his associates to make any criticism of his theories and that he drives all independent talent out of his circle in order tyrannically to impose his own will in matters scientific. People talk of his 'Old Testament' severity and even account for it racially. Now it is a sad truth that, in the course of time, certain men of conspicuous talent and many lesser lights have turned their backs on Freud, after following him for a longer or shorter period. Were they really actuated by purely scientific motives in leaving him? It seems to me that their sterility in scientific work, since then, does not testify in their favour.

I should like to throw into the scales your kind invitation to me as an argument against this notion of the 'orthodoxy' of the International Association and its spiritual leader, Professor Freud. I have no wish to measure my own standing against that of the colleagues to whom I have alluded; but it is a fact that I am fairly generally regarded as a restless spirit, or, as someone recently said to me at Oxford, the *enfant terrible* of psycho-analysis.

A considerable majority of you has criticized as fantastic, as altogether too original, the technical and theoretical suggestions

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<sup>1</sup> Read before the Vienna Psycho-Analytical Society at a meeting to celebrate Professor Freud's seventy-fifth birthday on May 6, 1931.

which I have submitted for your judgment. Nor can I say that Freud himself agrees with all that I publish. He did not mince matters when I asked his opinion. But he hastened to add that the future might shew me to have been right in many respects, and neither he nor I dream of suspending our collaboration because of these differences in method and in theory ; for on the most important principles of psycho-analysis we are in perfect agreement.

In one respect Freud is certainly orthodox. He is the creator of works which for several decades now have stood unchanged, intact—crystallized, as it were. His *Traumdeutung*, for example, is so highly polished a gem, so firmly joined in content and in form, that it withstands all the changes of time and of the libido, so that criticism scarcely ventures to approach it. Let us thank the fates that we have the good fortune to be fellow-workers with this great spirit—this *liberal* spirit, as we can proclaim him to be. Let us hope that his seventy-fifth year may restore to Professor Freud bodily health to match the unfailing vigour of his spirit.

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Now let us turn to the theme of my address to-day. During the last few years it has happened that certain facts of analytic experience have grouped themselves in my mind round ideas which urge me to temper materially the antithesis, hitherto so sharp, between the analysis of children and that of adults.

The first beginnings of child-analysis came from among your group. Leaving aside one isolated attempt of Freud's (which certainly pointed the way), we may say that the Viennese analyst, Frau v. Hug-Hellmuth, was the first to work methodically at the analysis of children. We have to thank her for the idea that such analysis should, as it were, start in the form of play. She and, later, Melanie Klein found that, if they wanted to analyse children, they would have to make considerable alterations in the technique used in adult analysis, mostly in the direction of mitigating its usual technical strictness. The systematic works on this subject of one of your members, Anna Freud, are universally known and esteemed, as is the masterly skill of Aichhorn's devices for making even the most difficult children tractable in analysis. I for my part have had very little to do with children analytically, and I have myself been surprised to come upon the self-same problems in quite a different quarter. How has this happened ? I can answer this question in a few words, but, before I do so, it will, I think, not be irrelevant to tell you something of an idiosyncrasy in the direction



my own work has taken. I have had a kind of fanatical belief in the efficacy of depth-psychology, and this has led me to attribute occasional failures not so much to the patient's 'incurableness' as to our own lack of skill, a supposition which necessarily led me to try altering the usual technique in severe cases with which it proved unable to cope successfully.

It is thus only with the utmost reluctance that I ever bring myself to give up even the most obstinate case, and I have come to be a specialist in peculiarly difficult cases, with which I go on for very many years. I have refused to accept such verdicts as that a patient's resistance was unconquerable, or that his narcissism prevented our penetrating any further, or the sheer fatalistic acquiescence in the so-called 'drying up' of a case. I have said to myself that, as long as a patient continues to come at all, the last thread of hope has not snapped. Thus the question constantly forced itself upon me: Is the patient's resistance always the cause of the failure? Is it not rather our own convenience, which disdains to adapt itself, even in technique, to the idiosyncrasies of the individual? In these cases, which appear to have 'dried up', and in which for long periods of time analysis brought neither fresh insight nor therapeutic progress, I had the feeling that what we call free association was still too much of the nature of a conscious selection of thoughts, and so I urged the patient to deeper relaxation and more complete surrender to the impressions, tendencies and emotions which quite spontaneously arose in him. Now the freer the process of association actually became, the more naïve (one might say, the more childish) did the patient become in his speech and his other modes of expressing himself. More and more frequently there were mingled with his thoughts and visual ideas little expressive movements, and sometimes 'transitory symptoms', which, like everything else, were subsequently analysed. Now in certain cases it transpired that the analyst's cool, waiting silence and his lack of any reaction had the effect of disturbing the freedom of association. The patient has barely reached the point of really forgetting himself and yielding up everything that is going on in his mind, when he suddenly rouses himself with a start from his absorbed state, and complains that he really cannot take the movement of his emotions seriously when he sees that I am sitting tranquilly behind him, smoking my cigarette and at most responding coolly and indifferently with the stereotyped question: 'Now what comes into your mind about this?' I said to myself then that there must be some way or means of getting

rid of this disturbance of association and affording the patient an opportunity of giving freer play to the repetition-tendency as it strove to break through.

But it was a very long time before the first suggestions came to me of how to do this and, once more, they came from the patients themselves. For example, a patient in the prime of life resolved, after overcoming strong resistances, and especially his profound mistrust, to revive in his mind incidents from his earliest childhood. Thanks to the light already thrown by analysis on his early life, I was aware that in the scene revived by him, he was identifying me with his grandfather. Suddenly, in the midst of what he was saying, he threw his arm round my neck and whispered in my ear: 'I say, Grandpapa, I am afraid I am going to have a baby!' Thereupon I had what seems to me a happy inspiration: I said nothing to him for the moment about transference, etc., but retorted, in a similar whisper: 'Well, but why do you think so?'<sup>2</sup>

As you see, I was entering into a game, which we might call a game of questions and answers. This was perfectly analogous to the processes described to us by those who analyse children, and for some time this little device was quite successful. But you must not suppose that I am able in this kind of game to ask every sort of question. If the question is not simple enough, not really adapted to a *child's* comprehension, the dialogue is soon broken off, some patients even reproaching me straight out with having been clumsy and having, so to speak, spoilt the game. Often this has happened because I introduced into my questions and answers things of which the child, at that time, could not possibly have known. I met with even more decided rebuffs when I attempted to give learned, scientific interpretations. I need hardly tell you that my first reaction to such incidents was a feeling of outraged authority. For a moment I felt injured at the suggestion that my patient or pupil could know better than I did. Fortunately, however, there immediately occurred to me the further thought that he really must at bottom know better about himself than I could do with my guesses. I therefore admitted that possibly I had made a mistake, and the result was not that I lost my authority, but that his confidence in me was increased. I may mention in passing that a few patients were indignant because I called this

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<sup>2</sup> *Translator's Note.*—In this dialogue both patient and analyst use the intimate pronoun 'du'.

method a game. They said that that was a sign that I did not take the matter seriously. There was a certain amount of truth in this too : I was soon forced to admit to myself and to the patient that many of the serious realities of childhood were concealed in this play. I had a proof of this when certain patients began to sink out of this half-playful behaviour into a kind of hallucinatory abstraction, in which they enacted before me traumatic occurrences, the unconscious memory of which lay in fact behind the dialogue of the game. Curiously enough, I made a similar observation at the outset of my analytical career. Once, when a patient was talking to me, he suddenly fell into a kind of hysterical ' twilight state ' and began to enact a scene. On that occasion I shook the man vigorously and shouted to him that he was to finish what he had just been saying to me. Thus encouraged, he succeeded, though only to a limited extent, in making contact with the world again, through me, and was able to communicate something of his hidden conflicts to me in intelligible sentences instead of in the gesture-language of his hysteria.

You see that in my procedure I have linked up the technical device of ' play-analysis ' with a certain preconception, which, however, was based on a number of observations : I assumed that one has no right to be satisfied with any analysis until it has led to the actual reproduction of the traumatic occurrences associated with the primal repression, upon which character and symptom-formation are ultimately based. When you consider that, according to our experience hitherto and to the premises with which we start, most pathogenic shocks take place in childhood, you will not be surprised that the patient, in the attempt to uncover the origin of his illness, suddenly lapses into a childish or child-like attitude. Here, however, several important questions arise, which I had in fact to put to myself. Is there any advantage in letting a patient sink into the primitive state of the child and act freely in this condition ? Does that really accomplish any part of the analytic task ? Are we not simply providing confirmation of the charge often brought against us that analysis fosters the sway of uncontrolled instincts, or that it simply provokes hysterical attacks, which might quite well suddenly occur for external reasons, without analytic help, and which only provide temporary relief ? And, in any case, how far is it legitimate to carry such analytic play ? Are there any criteria by which we may determine the boundary up to which this child-like relaxation is permissible and beyond which educative frustration must begin ?



Of course the task of analysis is not fulfilled when we have reactivated the infantile level and caused the traumas to be re-enacted. The material re-enacted in play or repeated in any other way has to be thoroughly worked through analytically. Of course, too, Freud is right when he teaches us that it is a triumph for analysis when it succeeds in substituting recollection for enactment. But I think it is also valuable to secure important material in the shape of action which can then be transformed into recollection. I too am in principle opposed to uncontrolled outbreaks, but I think it is expedient to uncover the hidden tendencies to enactment as fully as possible, before setting about intellectual work on them and the training in self-control which goes with this. You must catch your hare before you can cook him. So do not think that the analyses which I sometimes bring down to the level of a game are fundamentally so very different from analysis as hitherto practised. The sessions begin, as always, with thoughts originating from the surface level of the mind, and much time is spent—just as usual—on the events of the previous day. Then perhaps there comes a ‘normal’ dream-analysis, which, however, tends readily to go off into an infantile situation or into action. But I never let an analytic hour pass without thoroughly analysing the material acquired from enactment, and of course I give the fullest possible weight to all that we know (and have to bring to the patient’s consciousness) about transference and resistance and the metapsychology of symptom-formation.

The second question—up to what point is active expression in play to be permitted?—may be answered as follows. Adult patients, too, should be free to behave in analysis like naughty (i.e. uncontrolled) children, but if the adult himself falls into the mistake with which he sometimes charges us, that is to say, if he drops his rôle in the game and sets himself to act out infantile reality in terms of adult behaviour, it must be shown to him that it is he who is spoiling the game. And we must manage, though it is often hard work, to make him confine the kind and extent of his behaviour within the limits of that of a child. In this connection I would put forward the conjecture that the friendly affective attitudes of children—especially where they are also libidinal—are originally derived from the tender relation between mother and child, and that their naughtiness, fits of passion and uncontrolled perversions are generally a later result of tactless treatment by those around them. It helps the analysis when the analyst is able, with almost inexhaustible patience, understanding, goodwill

and kindness, to meet the patient as far as possible. By so doing he lays up a reserve by means of which he can fight out the conflicts which are inevitable sooner or later, with a prospect of reconciliation. The patient will then feel the contrast between our behaviour and that which he experienced in his real family and, knowing himself safe from the repetition of such situations, he has the courage to let himself sink down into a reproduction of the painful past. Here what happens reminds us vividly of the occurrences described by the analysts of children. Thus, for instance, a patient, when he confesses to a fault, suddenly seizes my hand, imploring me not to hit him. Very often patients try to provoke an expression of the ill-will which they imagine us to be concealing, by their bad behaviour, by sarcastic or cynical remarks, by all sorts of rudeness and even by making faces. It is not satisfactory to go on playing even in these circumstances the part of a grown-up who is always kind and indulgent: it is better to admit honestly that we find the patient's behaviour unpleasant, but that we feel it our duty to control ourselves, since we know that he is not going to the trouble of being naughty for no reason. In this way we discover a good deal about the insincerity and hypocrisy which he often could not but observe in the show or assertions of love made by those around him in his childhood, though he hid his criticism from everyone, and, later, even from himself.

Not infrequently patients, often in the middle of their free associations, produce little stories which they have made up, or even poems and rhymes, and sometimes they ask for a pencil so as to make us a present of a drawing, generally of a very naïve sort. Naturally I let them indulge in this and make the little gifts a starting-point for further phantasy-formations, which I afterwards analyse. Does not this by itself sound as if it came from the analysis of children? I should like at this point to confess to you an error in tactics, the retrieval of which taught me a great deal on an important matter of principle. I refer to the problem of how far my method with my patients may be called hypnosis or suggestion. Our colleague, Elizabeth Severn, who is doing a training-analysis with me, once pointed out to me, when we were discussing this amongst a number of other subjects, that I sometimes disturbed the spontaneity of the phantasy-production with my questions and answers. She thought that I ought to confine my assistance to stimulating the patient's mind to further efforts when it faltered, to overcoming inhibitions due to anxiety, and so on. It would be even better, she considered, if my stimulation took

the form of very simple questions instead of statements, which should compel the analysand to continue the work by his own exertions. The theoretical formulation which follows from this, and which I have acted on with much gain of insight, is that the suggestion, which is legitimate even in analysis, should be of the nature of general encouragement rather than special direction. This, I think, is materially different from the suggestion customarily practised by psychotherapists; it is really only a reinforcement of what in analysis we cannot help asking the patient to do: 'Now lie down and let your thoughts run freely and tell us everything that comes into your mind'. The phantasy-play itself is only a similar, though certainly a strengthened encouragement. The question about hypnosis may be answered in the same way. In all free association there is necessarily an element of self-forgetful abstraction; it is true that, when the patient is called upon to go further and deeper in this direction, it sometimes happens—let me frankly confess, with me very frequently—that a more profound abstraction arises. Where this takes a quasi-hallucinatory form, people can call it auto-hypnosis if they like; my patients often call it a trance-state. What is important is that one should not abuse this phase, in which the subject is unquestionably much more helpless than usual, by urging upon his unresisting mind one's own theories and phantasies. On the contrary, we ought to use our undeniably great influence here to deepen the patient's capacity for producing his own material. Putting it in a somewhat inelegant way, we might say that in analysis it is not legitimate to suggest or hypnotise things *into* the patient, but it is not only right but advisable to suggest them *out*. Here we get light, of some significance for education, on the course which we ought also to follow in the rational upbringing of children. Their suggestibility and their tendency, when they feel themselves helpless, to lean, without any resistance, on a 'grown-up' (that is to say, an element of hypnotism in the relation between children and adults) is an undeniable fact, with which we have to reckon. But instead of doing what is commonly done, going on using the great power which grown-ups have over children to stamp upon their plastic minds our own rigid rules as something externally imprinted, we might fashion that power into a means of educating them to greater independence and courage.

If, in the analytic situation, the patient feels wounded, disappointed or left in the lurch, he sometimes begins to play by himself like a lonely child. One definitely gets the impression that to be left deserted



results in a dissociation of personality. Part of the person adopts the rôle of father or mother in relation to the rest, thereby undoing, as it were, the fact of being left deserted. In this play separate bodily members—hands, fingers, feet, genitals, head, nose or eye—become representatives of the whole person, in relation to which all the vicissitudes of the subject's own tragedy are enacted and then worked out to a reconciliatory conclusion. It is noteworthy, however, that over and above this, we get glimpses into the processes of what I have called the 'narcissistic cleavage of the self' in the mental sphere itself. One is astonished at the large amount of auto-symbolic self-perception or unconscious psychology revealed in the phantasy-productions of analysands, as, obviously, in those of children. I have been told little tales about a wicked animal which tries to destroy a jelly-fish by means of its teeth and claws, but cannot get at it because the jelly-fish with its suppleness eludes each jab and bite and then returns to its round shape. This story may be interpreted in two ways: on the one hand it expresses the passive resistance opposed by the patient to the attacks of his environment, and, on the other hand, it represents the dissociation of the self into a suffering, brutally destroyed part and a part which, as it were, knows everything but feels nothing. This primal process of repression is expressed even more clearly in phantasies and dreams, in which the head, i.e. the organ of thought, is cut off from the body and goes about on feet of its own, or is connected with the body only by a single thread. All this calls for interpretation not only in terms of the patient's history, but also of auto-symbolism.

I do not at present want to consider more closely the meta-psychological significance of all these processes of dissociation and reunion. It will be enough if I can convey to you my own surmise that we really still have a great deal to learn from our patients, our pupils and obviously also from children.

Many years ago I made a short communication on the relatively common occurrence of a typical dream: I called it the dream of the learned infant. I was referring to those dreams in which a new-born or very young infant in the cradle suddenly begins to talk and to give wise advice to its parents or other grown-ups. Now in one of my cases the intelligence of the unhappy child in the analytic phantasy behaved like a separate person whose duty it was to bring help with all speed to a child almost mortally wounded. 'Quick, quick! what shall I do? They have wounded my child! There is no one to help! He is bleeding to death! He is scarcely breathing! I must bind up his

wound myself. Now, child, take a deep breath or you will die. Now his heart has stopped beating! He is dying! He is dying! . . .'. The associations, which followed from the analysis of a dream, now ceased, and the patient was seized with an opisthotonus and made movements as though to protect his abdomen. He was almost comatose, but I succeeded in establishing contact with him again and inducing him, with the help of the kind of encouragement and interrogation that I have described, to tell me about a sexual trauma of his early childhood. What I want to emphasize now is the light that this observation, and others like it, throw on the genesis of the narcissistic dissociation of the self. It really seems as though, under the stress of imminent danger, part of the self splits off and becomes a psychic institution which observed and desired to help the self, and that possibly this happens in early—even the very earliest—childhood. We all know that children who have suffered much morally or physically take on the appearance and mien of age and sagacity. They are prone to 'mother' others also; obviously they thus extend to others the knowledge painfully acquired in dealing with their own sufferings, and they become kind and ready to help. It is, of course, not every such child who gets so far in mastering his own pain: many remain arrested in self-observation and hypochondria.

There is no doubt that the united forces of analysis and of observation of children have a colossal task still before them in this direction—in problems which the common features in the analyses of children and of adults help us to formulate.

It might justly be said of my method with my analysands that it is like 'spoiling' a child. In following it, one gives up all consideration of one's own convenience, and indulges the patient's wishes and impulses as far as is in any way possible. The analytic session is prolonged till the emotions roused by the material are composed. The patient is not left to himself until the inevitable conflicts in the analytic situation have been solved in a reconciliatory way by removing misunderstandings and by tracing the conflicts back to infantile experiences. The analyst's behaviour is thus rather like that of a tender mother, who will not go to bed at night until she has talked out with the child all his current troubles, large and small, fears, bad intentions, and scruples of conscience, and has set them at rest. By this means we can induce the patient to abandon himself to all the early phases of passive object-love, in which—just like a real child on the point of sleep—he will murmur things which give us insight into his dream-

world. But even in analysis, this tender relation cannot go on for ever. *L'appétit vient en mangeant*. The patient, become a child, goes further and further with his claims and thus tends to put off more and more the advent of the situation of reconciliation, in order to avoid being left alone, i.e. to escape the feeling of not being loved. Or else he tries, by making more and more alarming threats, to impel us to some act of punishment. The deeper and the more satisfying the transference-situation, the greater, of course, will be the traumatic effect of the moment when we are finally compelled to put an end to this unrestrained licence. The patient finds himself in the situation of frustration which we know so well. This reproduces from the past the helpless rage and ensuing paralysed state, and we have to take great pains and shew much tactful understanding in order to bring back reconciliation even in these circumstances, in contrast to the lasting alienation of the same situation in childhood. This process gives us an opportunity of observing something of the mechanism of the genesis of a trauma. First, there is the entire paralysis of all spontaneity, including all activity of thought, and this may even be accompanied by a condition resembling shock or coma on the physical side. Then there comes the formation of a new—displaced—situation of equilibrium. If we succeed in making contact with the patient even in these phases, we shall find that, when a child feels himself abandoned, he loses, as it were, all desire for life or, as we should have to say with Freud, he turns his aggressive impulses against himself. Sometimes this process goes so far that the patient begins to have the sensations of sinking and dying. He will turn deadly pale, or fall into a condition like fainting, or there may be a general increase in muscular tension, which may be carried to the point of opisthotonus. What we see taking place here is the reproduction of the mental and physical agony produced by incomprehensible and intolerable woe. I will just remark in passing that these 'dying' patients also sometimes tell me interesting things about the next world and the nature of existence after death: to attempt to evaluate such statements psychologically would take us too far from our subject.

All these manifestations, often very alarming, suggested to Dr. Rickman, of London, with whom I discussed them, the question whether I kept remedies at hand in order to intervene if necessary to save the patient's life. I was able to reply that I did but that, so far, I had never had to use them. Tactful and calming words, reinforced perhaps by an encouraging pressure of the hand, or, if that is not



enough, a friendly stroking of the patient's head, help to mitigate the reaction to a point at which he becomes accessible again. In contrast to our own procedure, we then learn of the ill-advised and inappropriate actions and reactions of adults in the patient's childhood in the presence of the effects of traumatic shocks. Probably the worst way of dealing with such situations is that of denying their existence, of asserting that nothing has happened and that nothing is hurting the child. Sometimes he is actually beaten or scolded when he manifests traumatic paralysis of thought and motion. These are the kinds of treatment which make the trauma pathogenic. One gets the impression that children get over even severe shocks without amnesia or neurotic consequences, if the mother is at hand with understanding and tenderness and (what is most rare) with complete sincerity.

I am prepared here for the objection whether it is really necessary first to lull the patient by over-indulgence into a delusion of unfounded security, in order to subject him later to a trauma which must be all the more painful. My excuse is that I did not intentionally bring about this process: it developed as the result of what I considered a legitimate attempt to strengthen freedom of association. I have a certain respect for such spontaneous reactions, I therefore let them appear without hindrance, and I surmise that they manifest tendencies to reproduction which should not, in my opinion, be inhibited, but should be brought to full development before we try to master them. I must leave it to educationists to decide how far similar experiences are also to be found in the ordinary upbringing of children.

The patient's behaviour when he awakes from this infantile-traumatic abstraction is very remarkable, and I can confidently say, highly significant. We get here genuine insight into the way in which special bodily 'sites' are selected for the symptoms which set in after subsequent shocks. For instance, I had a patient who had a tremendous rush of blood to the head during the traumatic convulsion, so that she turned blue in the face. She woke as though from a dream, knowing nothing of what had happened or of the causes, but merely feeling that the headache, which was one of her usual symptoms, was unusually severe. Are we not here on the track of the physiological processes which bring about hysterical displacement of a purely psychic emotional disturbance on to a bodily organ? I could easily cite half a dozen such examples. One or two may suffice. One patient, who as a child had been forsaken by father and mother and one might almost say by God and man, had been exposed to the most painful

bodily and mental sufferings. He awoke from a traumatic coma with one hand insensible and pallid like a corpse's ; otherwise, except for the amnesia, he was fairly composed and almost at a stroke became fit for work. It was not difficult to catch in the very act, as it were, the displacement of all his suffering and even of death on to a single bodily member : the corpse-like hand represented the whole agonized person and the end of the struggle in insensibility and death. Another patient began to limp, after the reproduction of the trauma. The middle toe of one foot became flaccid and obliged him to pay conscious attention to every step. Apart from the sexual symbolism of the middle toe, its behaviour expressed the warning which the patient had given himself : ' Take care before you make a step, so that the same thing does not happen again '. His native language being English, he followed up my interpretation with the remark : ' You mean that I am simply acting out the English expression : " Watch your step " '.

Now if I suddenly stop here and imagine the words which are on the tips of my listeners' tongues, I seem to hear on all sides the astonished question : ' Can you really still apply the term " psycho-analysis " to what goes on in these " child-analyses " of grown-up people ? You speak almost exclusively of emotional outbursts, of reproductions of traumatic scenes, so vivid, as to amount to hallucination, and of spasms and paræsthesias which may safely be called hysterical attacks. What has become of the fine dissection, economic, topographical and dynamic, and reconstruction of the symptom-structure ; what of the tracing of the changing energy-cathexes of the ego and the super-ego—and all the characteristic procedure of modern analysis ? ' It is true that in this lecture I have confined myself almost entirely to the evaluation of the traumatic factor, but in my analyses this is not in the remotest degree what happens. For months and often years at a time, my analyses, too, proceed on the level of the conflicts between the intra-psychic forces. With obsessional neurotics, for instance, it sometimes takes a year or even longer before the emotional element secures expression at all. During these periods all that the patient and I can do, on the basis of the material which he produces, is to seek to track down intellectually the original causes of his protective measures, the ambivalence in his affective attitude and behaviour, the motives of his masochistic self-torment, and so forth. So far as my experience goes, however, there comes sooner or later (often, I admit, very late) a collapse of the intellectual superstructure

and a breaking through of the fundamental situation, which after all is always primitive and strongly affective in character. Only at this point does the patient begin to repeat and find a fresh solution for the original conflict between the ego and its environment, as it must have taken place in his early childhood. We must not forget that a little child's reactions to pain are in the first instance always physical: only later does he learn to control his bodily expressions, those prototypes of all hysterical symptoms. It seems, indeed, that nerve-specialists are right in saying that in our day it is becoming much more rare for people to produce palpable hysterics such as, only a few decades ago, were described as comparatively widespread. It seems as if, with the advance of civilization, even the neuroses had become more civilized and adult. But I believe that, if we are sufficiently patient and persevering, even firmly consolidated, purely intrapsychic mechanisms can be demolished and reduced to the level of the infantile trauma.

Another difficult question which will be immediately put to me is that of the therapeutic results. You will understand only too well that as yet I can make no definite pronouncement on this point. But I must confess two things: that my hope of considerably *shortening* the analysis by the help of relaxation and catharsis has, so far, not been fulfilled and that this method has made the analyst's work considerably more laborious. But what it has done—and I trust will do still more—is to deepen our insight into the workings of the human mind in health and in disease and to entitle us to hope that any therapeutic success achieved, being based on these deeper foundations, will have a better prospect of permanence.

And now let me conclude with a question of practical importance. Is it necessary and possible in *training*-analyses, likewise, to penetrate to this deep infantile stratum? If so, the indefinite length of my analyses leads to tremendous practical difficulties. And yet I believe that anyone who has the ambition to wish to understand and help others should not shrink from this great sacrifice. Even those who undergo analysis for purely professional reasons must thus submit to becoming slightly hysterical, i.e. slightly ill, during its course, and it becomes evident then that even character-formation is to be regarded as a remote consequence of very strong infantile traumas. But I think that the cathartic result of being submerged for a time in neurosis and childhood has ultimately a reinvigorating effect, and that, if the work is carried right through, it does no sort of harm. In any case the procedure is much less dangerous than the self-sacrificing



experiments of many medical men, who have studied the effects of various infective poisons upon their own persons.

If the line of thought which I have endeavoured to present to you to-day comes at any time to receive recognition, the credit will in fairness have to be shared between me and my patients and colleagues. And of course, also with those analysts of children whom I have already named. I should think myself happy if I had succeeded in making at least a beginning towards more intimate co-operation with them.

I should not be surprised if this paper, like some others which I have published of late years, gave you the impression of a certain *naïveté* in my outlook. It may strike you as odd that anyone, after working at analysis for twenty-five years, should suddenly begin to regard with wonder the fact of psychic traumas. It is like an engine-driver I knew, who was pensioned after fifty years' service, but used to go down to the station every afternoon and gaze in wonder at a train just going out, often exclaiming: 'Isn't a locomotive a marvellous invention!' Perhaps this tendency or ability to contemplate naïvely what has long been familiar is also something I have learnt from our teacher, who, during one of our unforgettable summer holidays together, surprised me one morning by announcing: 'You know, Ferenczi, dreams really are wish-fulfilments!' He went on to tell me his latest dream which certainly was a striking confirmation of his inspired theory of dreams.

I hope you will not forthwith reject what I have told you, but will defer your judgment until you have procured some experience under the same conditions yourselves. In any case I thank you for the courteous patience with which you have listened to my remarks.

## SOME PSYCHOLOGICAL ASPECTS OF A FOX-HUNTING RITE

BY

INGEBORG FLUGEL

There exists in England to-day a curious hunting rite, which is well known to all followers of hounds, but which, perhaps because of its very strangeness and barbarity, is seldom if ever mentioned in the copious literature of hunting. When a person—nowadays usually a child—is present at a kill of a fox<sup>1</sup> for the first time, the Master, taking some severed portion of the animal, smears some of the blood upon the face of the person, who is not allowed to wash it off until the evening. This procedure of 'Blooding' or 'Christening', as it is called, is regarded as an honour, and, to judge from various accounts I have collected, usually gives great pleasure to the parents of the children who are blooded, though the children themselves naturally react to the ceremony very varyingly. Some are not a little terrified. One small boy cried bitterly, until, to the dismay of his parents (who belonged to a well-known fox-hunting family) it became necessary to wash the blood stains away before the appointed time. Others are proud of the distinction; indeed, the late H. W. Selby-Lowndes, who was blooded at four and a half, refused to have his face washed even at bedtime.<sup>2</sup> What can be the meaning of this curious and bloody rite which, if reported of a primitive people, would surely be regarded as a sign of savagery? It is clear we have to do here with an initiation ceremony. Indeed, in the words of a recent correspondent,<sup>3</sup> 'the boy or girl who has been blooded, is definitely considered to be admitted to the ranks of Nimrod and Diana'. To be blooded is, as we have said, an honour—a point which it has in common with all initiation ceremonies. But we have to ask why the honour should take this peculiar form. There can be very little doubt, that the smearing with the fox's blood indicates that the initiated has himself participated in the kill, and thus shared both the honour and the guilt attaching to the deed. He has become like one of those to whom Mark Antony refers:<sup>4</sup>

. . . 'And here thy hunters stand  
Signed in thy spoil, and crimsoned in thy lethe.'

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<sup>1</sup> The same rite is sometimes practised in hare and otter hunting.

<sup>2</sup> *Hunting Reminiscences* of H. W. Selby-Lowndes.

<sup>3</sup> R. J. Fairfax-Blakeborough: *Notes and Queries*, March 8th, 1930.

<sup>4</sup> *Julius Cæsar*, III. i. 204.

To realize the full meaning of this honour, we must pass from fox hunting to other forms of hunting which precede it. In the earlier days, it was indeed esteemed a special honour actually to kill the hunted animal when brought to bay, and only those of a certain social standing were allowed this privilege—a privilege which, it was dimly supposed, was not unappreciated by the animal itself, for there seems little doubt that some genuine feeling finds expression by the mocking words of A. P. Herbert when he says in *Tantivy Towers* :

And one of the jolliest features  
Of slaying superfluous game  
Is the thought that we're saving the creatures  
From a death of dishonour and shame—  
And they're lucky to die as they do,  
For if they do not  
They're sure to be shot  
By someone who's not in *Who's Who*.  
And I give you my word  
That a sensitive bird—  
A point for our foolish reproachers—  
Prefers its career  
To be stopped by a peer  
And not by unmannerly poachers.

The animal could only be killed or cut up in a certain way, by certain instruments, or after certain ceremonies. Erasmus <sup>5</sup> writing at the beginning of the sixteenth century says : ' When they have run down their game, what strange pleasure they take in cutting it up ; cows and sheep may be slaughtered by common butchers, but what is killed in hunting must be broke up by none under a gentleman, who shall throw down his hat, fall devoutly on his knees, and, drawing out a slashing hanger (for a common knife is not good enough), after several ceremonies, shall dissect all the parts as artificially as the best skilled anatomist, while all that stand around shall look very intently '. There exists for instance a contemporary picture of a kneeling huntsman offering to Queen Elizabeth a knife with which to cut the throat of a stag which is lying on his back before her. But it would seem that other noble dames had sometimes the same privilege, for Pope <sup>6</sup> refers to the compliment our huntsmen pass on ladies of quality, who

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<sup>5</sup> Erasmus : *Morias Encomion*.

<sup>6</sup> Pope : *Guardian*, No. 61.



are present at the death of a stag, when they put a knife in their hands to cut its throat, a custom which he describes as 'barbarous enough to be derived from the Goths or even the Scythians'. The fact that it is regarded as a special honour to be allowed to kill the hunted animal, is in harmony with the general attitude towards hunting as a whole, which was considered an aristocratic pastime, the mere participation in which was to some extent a privilege. Poaching has always been regarded as a serious offence, often punished with a severity quite out of proportion to the material damage that was done. This applied particularly to any attempt to hunt or chase any animals belonging to the King, against which crime the laws demanded that the most terrible penalties should be inflicted. In England 'the earliest forest laws of which there is record are those of Canute (1016). Under these, if a freeman offered violence to a keeper of the King's deer he was liable to lose freedom and prosperity; if a serf, he lost his right hand, and on a second offence, was to die. One who killed a deer, was either to have his eyes put out or to lose his life. Under the first two Norman kings, mutilation was the punishment for poaching'.<sup>7</sup> It is true that in England, fox hunting has been democratized for 150 years at least, but traces of special privilege still remain. One cannot ask to be 'blooded'; it is a compliment that must be freely offered, and the same applies to special colours and hunt insignia—no one may wear these insignia unless asked to by the Master, whose offer has the force of a command, for at the next meeting of the hunt, colours, buttons, etc., must all be in order.

But though hunting itself was a privilege, those who enjoyed this privilege had nevertheless to observe most punctiliously the ritual of the sport, a ritual which culminated in the act of killing, dissecting and distributing the quarry, and according to which certain specially valued parts (mask, brush, pads, etc., in the case of foxes) were allotted to some particularly honoured persons, and the rest thrown to the hounds as their share of the spoil. Now this ritual would seem to imply that the hunted animal itself was honoured: a conclusion which emerges both from hunting literature and the ritual itself. As an example from more modern literature let us quote Whyte-Melville<sup>8</sup> as regards the stag: 'But of all the forest creatures hunted by our forefathers and ourselves, the stag has been considered from time

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<sup>7</sup> *Encyclopædia Britannica*, 11th Edition. Article on 'Mutilation'.

<sup>8</sup> *Katerfelto*, p. 214.

immemorial the noblest beast of chase. His nature had been the study of princes, his pursuit the sport of kings. The education of royalty would have been thought incomplete without a thorough knowledge of his haunts and habits, while books were written and authorities quoted on the formalities with which his courteous persecutors deemed it becoming that he should be hunted to death . . . an animal that can fly twenty miles on end for life, and die with its back to the rock, undaunted in defeat, a true gentleman to the last, is surely no unworthy object of pursuit'.<sup>9</sup>

With regard to the ritual we may refer once more to Erasmus' description of the 'gentleman' who 'shall throw down his hat' and 'fall devoutly on his knees before despatching the game' (*op. cit.*). Such extreme signs as are here indicated surely give the clue to the whole psychological attitude involved in these ceremonies, they overwhelmingly suggest a religious sacrifice—of which at once the most primitive and the clearest examples are to be found in the ritual of totemism. If the attitude of the hunter in modern Europe really retains some totemic elements we should expect to find a parallelism in other details also.

Traces of such a parallelism are indeed not wanting. We know, for instance, that the attitude of the clansman towards his totem is distinctly ambivalent,<sup>10</sup> a fluctuating medley of veneration, fear, hatred, and even of friendliness. The fox is to some extent the recipient of all these feelings. The hunter's attitude towards him differs markedly according to the seasons. As the famous Mr. Jorrocks says in Surtees' *Handley Cross*, . . . 'In the summer I loves him with the Hardour of affection, not an 'air of his beautiful 'ead would I hurt: the sight of him is more glorious nor the Lord Mayor's show! but when the hautumn comes—when the brownin' copse and cracklin' stubble proclaim the farmers fears are past, then, dash my vig, 'ow I glories in pursuing him to distruction, and holding him above the bayin' pack'. A similar ambivalence, but one that is more stable in its manifestations,

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<sup>9</sup> The fact that the hunted animal itself was held in honour, and that the killing of it was a princely privilege, are both well brought out in the continuation of the already quoted passage from *Julius Caesar* :—

'O World! Thou wast the forest to this hart;  
And this indeed, O World! the heart of thee.  
How like a deer stricken by many princes,  
Dost thou here lie':

<sup>10</sup> Freud: *Totem and Taboo*.

is shewn by those who, like Lady Claire Annesley, from being keen fox hunters, subsequently become active opponents of the sport. At the present time the hostility to 'Blood Sport' would seem to be gaining ground in some quarters. At any rate, this school of thought recently captured a majority at a meeting of the 'Dumb Friends' League', an event which led to the resignation of the then President, Lord Lonsdale. Perhaps the earliest recorded instance of the change of attitude in question, is that of St. Hubert who, according to the well-known tradition, desisted from hunting when he saw a stag with a luminous crucifix miraculously suspended between its horns. As this incident which brought about the saint's conversion happened on a Good Friday, there seems little doubt that the hunted animal was unconsciously identified with the crucified Saviour Himself—a fact which once again reveals the deicidal (i.e. in the last resort totemic) element in hunting. The continuance of the ambivalent attitude in later generations is, moreover, manifested by the fact that St. Hubert has been made the patron saint of hunters, in spite of the fact that his canonization is connected, not with his prosecution, but with his abandonment, of hunting.

The honour and respect shown to the fox (as to other hunted animals) accords ill with the cruel manner of his death—a common feature of totemism and of the corresponding sacrifices of divine persons or animals in the higher religions. Ambivalence is shown even in the disposal of the remains, for while certain parts, such as the mask, brush and pads<sup>11</sup> are highly valued, and are themselves only presented to honoured persons—the remaining portions are thrown ignominiously to the hounds. An act which if we can trust the linguistic parallel of 'going to the dogs', certainly implies contempt. The numerous stories illustrating the proverbial cleverness of the fox shew that we see in him a creature of fantastic cunning,<sup>12</sup> but almost always with evil intent—in short, the nearest approach to an incarnation of the devil in animal form. It is not perhaps surprising to read in *The Gentlemen's Recreation* of circa 1650<sup>13</sup> that: 'If greyhounds course him on a plain, his last refuge is to piss on his tail, and to flop it

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<sup>11</sup> The tail of the fox can of course be a phallic symbol, as was recognised by Gubernatis. (Fowler: *Roman Festivals*.)

<sup>12</sup> As illustrated, for instance, in the greatest of all fox epics, Goethe's *Reinecke Fuchs*.

<sup>13</sup> N. Cox: *The Gentlemen's Recreation*.



on their faces, sometimes squirting his thicker excrement upon them to make them give over the course of pursuit'. But we may open our eyes when we find the following account of his almost incredible ingenuity in the latest edition of the *Encyclopædia Britannica*: 'Taking in his mouth a tuft of wool, or piece of wood, a fox will slowly sink himself, tail first, into a pond, and thus gradually drive the fleas forward until their last refuge is on the wood or wool on the surface of the water. The fox then sets this adrift teeming with the parasites and keeping clear of it, lands on the bank and makes off'.

Another parallel with the totemic animal is that the fox can be killed only in certain ways and in certain seasons, as a collective deed performed with the due ritual. To shoot a fox in modern England is almost as wicked as for a member of a totemic community to kill his totem otherwise than in the appointed manner—as a hunting friend said to me concerning the fox shooter, 'His name is less than mud'; and the curse pronounced upon such persons in that exquisite document, *The Fox Hunter's Creed*, dedicated to Selby-Lowndes by T. C. Young, ex-M.F.H. of Haydon hounds, has the true smack of primitive magic: 'He that killeth or taketh a fox by any means save by hunting, let him be accursed. Yea, let him be everlastingly damned, may his dwelling become desolate, and his possessions a desert; may his soul be filled with bitterness, and his body with pain'.

Another important feature of totemism is that the clansman to some extent identifies himself with the totem by means of sacrifice. In this sacrifice, identification usually takes place by eating, through which the divine essence is incorporated in each participant. An ambivalent attitude is shewn here by the fact that the holy meal is usually preceded by a fast. Faint relics of feasting and fasting are to be seen in connection with hunting also. At least, we can read in another article of *The Fox Hunter's Creed*, this time in distinctly religious phraseology: 'If it be possible let every true believer of the faith abstain from all food and drink during the day, save only sufficient to sustain life in case of need. The whole day is to be spent as a special fasting, and strengthening of the mind in the Faith. He shall partake of food and drink in the evening. Verily after a good day he shall partake of a special allowance of drink'. This is clearly reminiscent of the ritual of fasting that so often precedes both eating of the totem and the equivalent ceremonies in the more developed religions, not excluding that of Christian service.<sup>14</sup> It may be that

<sup>14</sup> The ambivalent attitude in the Communion service is revealed by

the practice of 'bleeding' or 'christening' (a term borrowed from the first ceremony of initiation into the church) which to some extent establishes a physical connection or identity, between initiate and fox, springs from motives that are not altogether dissimilar from those that impel the worshipper to seek identity with the divine victim. At any rate in Borneo the killing of an animal corresponding to an individual totem may be accompanied by sacrifice in which blood is smeared upon the sacrificer.<sup>15</sup> The smearing of blood upon the face may even be a shortened and symbolic expression of the more primitive practice of drinking the blood; for in certain initiation ceremonies of Australian tribes the initiates are covered with the blood of fellow tribesmen which at the same time they drink;<sup>16</sup> the meaning of this covering with blood in the sense of identification being, in Frazer's opinion, 'beyond a doubt'.

Another parallel between the totemic sacrifice and hunting is the desire in both cases that all present shall continue to participate until the end of the ceremony—a desire that in the case of sacrifice undoubtedly springs not only from the wish that all should share the benefits, but partly also from the need to share the guilt. It was for this reason that we suggested earlier that 'bleeding' might also constitute a sign of partnership in guilt. At any rate the author of *The Fox Hunter's Creed* disapproves highly of anyone desisting from the hunt before the end, for another of his articles ran 'accursed be he that goeth home of his own free will before hounds'. Corresponding to the elaborate ceremonial in the case both of hunting and of totemic sacrifice is the need for special instruction for those who are to become initiated. The explanation of totemic ceremonies constitutes an important part of the initiation ceremonies of primitive peoples. As regards hunting we have already heard that the education of royalty itself was deemed incomplete without a thorough knowledge of the chase, and of the 'haunts and habits' of the hunted animals. In *The*

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the doctrine that, whereas participation in the Communion is highly beneficial to the pious, it is full of danger if we partake of it unworthily, for then 'we are guilty of the body and blood of Christ, Our Saviour (i.e. become His murderers) and drink our own damnation, not considering the Lord's body, we kindle God's wrath against us, we provoke Him to plague us with diverse diseases, and sundry kinds of death'. It is clear that the old feelings of guilt connected with sacrifice are not so very deeply buried.

<sup>15</sup> Frazer's *Totemism and Exogamy*, II, pp. 210, 211.

<sup>16</sup> *Op. cit.*, I, p. 42; IV, p. 200.

*Fox Hunter's Creed*, moreover, we read: 'It is lawful and right that those of experience shall carefully give explanation and encouragement to all young persons and instruct by word and deed at all times, so that fox hunting shall continue in the land from generation to generation. He that thinketh he knoweth, but knoweth not, let him be accursed'.

Finally, we may note that just as in certain religions containing totemic elements, the sacrifice of an animal and of a human being can be regarded with very similar feelings, so too in hunting, there are not wanting traces of an association between the slaying of the hunted animal and the death of a man. There exists a tradition that the ceremony of cutting off the right foot of a stag and presenting it to the most honoured guest owes its origin to the old feudal right known as 'main morte', by which a seigneur, 'had the right hand of any of his serfs who died brought to him as an indisputable proof that the serf in question was in all truth defunct and had not feigned death and fled, in the hopes of obtaining his freedom'.<sup>17</sup> But the practice of 'main morte' was itself almost certainly merely an adaptation of the more primitive and widespread custom of cutting off the hands or otherwise mutilating enemies killed in war. A most dramatic example of the association between killing of a hunted stag and an attempted murder of a rival, is to be found in Whyte-Melville's already quoted novel, *Katerfelto*, in which the villain attempts to kill the hero at the very moment when the latter is dispatching the stag. That this is no chance association is shewn by the villain's previous musings when contemplating his rival's downfall: 'How much better', he thought, 'to track him as Tancred (a favourite hound) tracked the deer, never slacking in effort, never off the scent, never turning aside for any consideration, till he had run him ruthlessly down'.

Though the resemblance between totemism and hunting, as regards any one of the points we have mentioned, may perhaps seem to depend on somewhat slender evidence, the correspondence as a whole is nevertheless worthy of consideration. No one, I think, can deny that hunting appeals to primitive instincts, and a kill seems necessary to the full enjoyment. If we are right in assuming that the kill awakens faint echoes of deep totemic tendencies, the satisfaction that it so universally affords is perhaps made somewhat clearer, and we can understand better the profound content that the successful sportsman manifests. We can see, too, perhaps, why hunting continues to be

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<sup>17</sup> W. A. Baillie-Grohman: *Sport in Art*, 2nd Ed., p. 330.



popular, even—as at the present time—after the bloodiest of wars when it might have been supposed that there had been enough of killing (for some hunts to-day are in danger of being overcrowded). Finally, we can understand why there is a tendency for the hunted animal, whatever it may be, to be regarded with esteem, and to be honoured by a certain ritual. Foxes, formerly looked upon as vermin, have now become the recipients of feelings that formerly, and more naturally, were directed to the stag, which has now almost ceased to be available. It seems not impossible that some day, for a similar reason, we may have the same feelings towards the humble rabbit.

So by tortuous ways, aided by the versatility of human nature, does man continue to fulfil his deepest tendencies.

For information on various points, I am indebted to Mrs. E. Penry-Williams, Dr. R. E. Slade, and especially to Dr. R. Money-Kyrle from whose book, *The Meaning of Sacrifice*, I have derived much help, as regards both material and information.

## SHORTER COMMUNICATION

### A NOTE ON SYMBOLIC CASTRATION IN PREHISTORIC MAN <sup>1</sup>

In a recent volume by Sir Arthur Keith <sup>2</sup> there is given an account of Miss Dorothy Garrod's excavations in 1928 in some of the caves of ancient Palestine. In the deepest stratum of one of these caves there was found an abundance of flint implements corresponding with the Aurignacian and later cave cultures of Europe, dating from about 15,000 to 20,000 years ago (upper Palæolithic level), and also a number of human fragments. Among these fragments there was one of an upper jaw which is of particular psycho-analytical interest; it is described in part by Keith as follows: 'The later cave dwellers of Shukbah practised a rite which is still observed by many negro tribes of Africa. They removed one or both upper central incisors in youth, which resulted in atrophy of the corresponding alveolar part of the upper jaw and in an upgrowth of the unopposed lower incisors. In figure 64 a drawing is reproduced of the right half of the palate of one of the Shukbah people: it came from the deepest stratum of the cave and has male characters.<sup>3</sup> . . . My main object is to draw attention to the practice of removing the upper incisors. If only one example had been found, the early loss of an upper incisor might be attributed to accident. Altogether five palates were sufficiently complete to give evidence of this practice. In only one palate are we certain that there was no extraction. In one case extraction was confined to the upper incisor of the right side. . . . In another instance both central incisors had been extracted. . . . In three of the five men one or both upper central incisors had been removed in early youth. Evidence of the practice is found in the uppermost as well as in the deepest stratum of the cave.

'It so happened, a little before the British School in Jerusalem submitted to me human remains from Shukbah, that Mr. Alonzo W. Pond, who had been excavating a Caspian site in Algeria, came to see

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<sup>1</sup> Communicated to the Boston Psycho-Analytical Society, May 12, 1931.

<sup>2</sup> *New Discoveries Relating to the Antiquity of Man*, New York, 1931. (Chapter XIII., 'The Later Cave Men of Palestine', pp. 211-214.)

<sup>3</sup> The drawing shows an atrophy of the part of the palate which carries the upper central incisor, consequent on early removal of the tooth. In this drawing two of the upper incisors have been removed.

me. He told me he had found evidence of extraction of central incisor teeth. . . . As at Shukbah, the remains of children were as plentiful as those of adults. As at Shukbah, the bones were broken and distorted by earth pressure. Wilful hacking was not observed, but there was the same practice of removal of the incisor teeth in youth. In the four skeletons which Dr. Fay-Cooper Cole examined from the middle site—one female and three male—the upper central incisors had been removed in all cases, and in some the corresponding lower incisors as well.

‘When we take into consideration the distance of Algeria from Palestine, and the antiquity of the two peoples we are considering—for the Caspian culture of North Africa is regarded as contemporary with the later Aurignacian culture of Europe—it is remarkable to find such a degree of correspondence between the cultures of Algeria and Palestine—particularly that they should have the practice of incisor extraction in common.’

These discoveries, as described by investigators whose interests are pre-eminently anatomical, are of great psycho-analytical value, particularly when it is emphasized that evulsion of the incisor teeth in early youth (and the skeletal remains in which the upper incisors had been removed were those of young people) is a symbolic castration, a displacement from below upward. The tooth is a phallic symbol, and its phylogenetic parallel, as evidenced both in prehistoric man and in primitive Australian tribes, is one of the most prominent features of genuine symbolism. The widely spread uniformity of its symbolism demonstrates the deeper meaning of unconscious material and the independence of local or individual conditions, a most convincing argument against the theory of diffusion of cultures which has been emphasized by certain anthropologists.

It has been pointed out by Roheim,<sup>4</sup> following Reik, that there is ample proof to show that initiation is a symbolic castration of the younger men, and is carried out either in the form of circumcision or of evulsion of the teeth. The further removed the mutilation practised is from the original sexual organ the more symbolic it becomes, because of the greater influence of repression. The knocking out of the teeth is therefore more symbolic than circumcision. These castration symbolisms are related phylogenetically to the aggressive aspects of the father-imago (Œdipus complex) ; they have a close connection

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<sup>4</sup> *Social Anthropology*, 1926.



with the castration-complex and the symbolic castration ritual itself is a repetition of tendencies that at one time dominated even the remote past. It harmonizes with Freud's statement,<sup>5</sup> that the boy's Œdipus complex in the course of its development succumbs to castration, and that the phallic stage of genital organization is influenced by this threat. What is true of the individual in the course of his development can also be found at a level of primitive culture in one of the earliest epochs of history. In civilized youth, with the exception of ritual circumcision, the castration is psychical; in primitive man it is physically effected in the form of a symbolic initiation rite. These castration symbolisms are therefore repetitions of repressed elements in varying forms, or, to use Roheim's phrase, they are reflections of backward projections.

The ever-present libidinal conflict and rivalry between the older and younger men of the tribe is part of the Œdipus situation. Consequently the teeth are forcibly knocked out as a form of castration, an unconscious symbol of antagonism of the father towards the young son for the purpose of protecting the mother from incestuous relationships. Thus the primeval Œdipus drama is not only enacted in civilized man and in the primitive Australian tribes, but also had its roots at the very beginnings of human culture, a fact showing that an unconscious family conflict was coeval with the earliest advent of man. The incest wish must, therefore, have existed in Aurignacian times; and in the form of the Œdipus complex it constituted one of the earliest fundamental elements in the evolutionary struggle of the human race. The aggressive reaction to this Œdipus conflict assumed the form of a symbolic castration through knocking out of the incisor teeth, a practice which had developed even during the early period corresponding to the cave cultures. It was practised not only in Palestine, but also in Algeria, an interesting example of similar symbolic expressions of unconscious material, both phylogenetic parallels having a constant meaning and being carried out in an analogous displaced manner.

The remarkable discoveries, as described by Keith, show the amazingly uniform features in the genuine symbolism inherent in the castration-complex and demonstrate the existence of the castration wish at the very dawn of human culture.<sup>6</sup> Such observations show

<sup>5</sup> 'The Passing of the Œdipus-complex', *Collected Papers*, Vol. II.

<sup>6</sup> See Sollas' *Ancient Hunters*, 1924 (p. 291, Fig. 149), for an illustration showing the initiation ceremony of knocking out an upper incisor tooth among the native inhabitants of New South Wales.

the unbroken unity of mental processes and dominance of the Œdipus and castration complexes in the psychic life of human beings. Furthermore, it can be speculated that this symbolic castration in prehistoric man points, in even these remote times, to well-developed moral prohibitions of the super-ego, in that the repressed death-wish is expressed in a non-lethal form. As a result of such a displaced castration the son is believed to become a weaker rival to the powerful father whom he has introjected, through remaining arrested at an earlier level of libido-development.

Isador Coriat.  
(Boston, U.S.A.)

## BOOK REVIEWS

*Zeugung, Geburt und Tod : Werden und Vergehen im Mythos und in der Vorstellung des Kindes : Ein psychoanalytischer Vergleich.* By Von Gustav Hans Graber. (Merlin-Verlag, Baden-Baden, 1929. S. 180. Brosch, M.4.20, geb., M.5.80.)

This is a very welcome book by the well-known author of *Die Ambivalenz des Kindes*. It brings together a large amount of material, chiefly from mythology, connecting the themes of birth and death. The scope of the book is best shown by the following chapter headings :—

- I. Die Dyas (Zweiheit).
- II. Die Zeugung.
  - A. Aus der Menschheits—und Einzelentwicklung.
  - B. Die sexuelle Frage.
  - C. Unbewusste und symbolische Zeugungsvorstellungen.
  - D. Die bewusste Lösung.
- III. Die Geburt.
  - A. Die kosmogonische Geburt (Weltentstehungsmythen).
  - B. Die Geburt in der Vorstellung des Kindes.
- IV. Der Tod.
  - A. Geburt und Tod.
  - B. Tod und Schlaf.
  - C. Der Weltuntergang.
  - D. Unsterblichkeit.

The chief defect of the book is its extremely scanty use of the extensive material published by other psycho-analysts on the same theme.

E. J.



*Nursing Psychological Patients.* By Mary Chadwick, S.R.N. (London : George Allen & Unwin, Ltd. Pp. 256. Price 10s. net.)

Dr. Forsyth in his Foreword agrees with Miss Chadwick that most nurses do not understand neurotic cases ; perhaps this failure is partly due to a similar ignorance on the part of those responsible for the scientific training of the nurse. Here is anyway a valiant attempt to remove the reproach from the nurse herself. A careful study of this book with a mind sufficiently open and alert to be able to refer to the actual patient's condition and behaviour in confirmation of Miss Chadwick's statements will give enlightenment.

The chief forms of nervous disorders and their psycho-pathology are described in language that is sufficiently free from technicalities to make the conditions clear to well-educated women—the only class of nurses to whom the book is addressed. Having stated the general principles



of nervous disorders Miss Chadwick prefers to leave, for the most part, the application of the principles to the nurse herself, pointing out that to be efficient the nurse ' must know the properties of her own psychology '. This is a high ideal, but how many nurses are placed in a position to reach it ? In some future work, to be helpful even to the well-trained nurse, Miss Chadwick must condescend to give illustrations, drawn from experience, of the application of these psychological principles in the handling of the patient, and of some of the dangers to be avoided. There is one danger that every nurse who studies Miss Chadwick's book should be warned against—the use before their patients (and before their doctors) of such terms as repression, Œdipus complex (with the favourite inferiority complex), or ' That's because you identify me with your mother '. Technical language, sometimes called jargon by those who cannot write English correctly, has its proper place in literature, but not in the sick room.

Some fuller exposition is required of manic-depressive disease, for the milder forms of this illness form probably the majority of cases where private nursing is required.

There are a few obscurities and some needless repetitions. On p. 69 ' Similar hysterical changes . . . will be spoken of as Hypochondria or Fixation Hysteria ' might mislead the reader into regarding these as synonymous terms. Identification is defined on p. 78, and again on p. 83, but in neither case is it made clear that the term is used for an unconscious mental process. Auditory and other hallucinations are not characteristic of the obsessional neurosis (p. 121). On p. 65 we are told that ' hysterical patients suffer principally from reminiscences ' (here the German text is quoted, and references given to both the English and German texts). On p. 159 we are again reminded that ' Freud long ago pointed out that the hysterical patient suffers for the most part from reminiscences ', and again on p. 177, ' The hysterical patient suffers for the most part from reminiscence, Freud tells us in his first book ' ; the translation varies each time, but the quotation is from the same source, whilst the real significance of the statement is not brought, despite this repetition.

These and a few other blemishes, which can be removed in the next edition, do not impair the value of a book that will be helpful, not only to the professional nurse, but to all those who have to live with the unhappy sufferers from nervous disorder.

M. D. Eder.

★

*The Morbid Personality.* By Sandor Lorand, M.D. Foreword by A. A. Brill, M.D. (New York : Knopf, 1931. Pp. 181. Price \$3.00.)

This is another of the dogmatic presentations of something related to psycho-analysis for public consumption. It is chiefly noteworthy for

Dr. Brill's foreword—a measured statement of the importance of a study of character—coupled with the Preface by the author. The former remarks that the author's 'method of approach in the treatment of these character anomalies ought to be of special interest to the psychologist, sociologist, and interested layman'; the latter begins with the statement that 'this book is intended for members of the medical profession and for those lay readers to whom psycho-analysis is not altogether strange'. Despite this assurance, the reviewer finds a good deal that is strange and not very intimately related to Dr. Brill's foreword in the text. The meaning of various statements throughout the book is obscure to a degree. This may in part arise from a somewhat ambitious envisagement of well-nigh everything, coupled with a liberal use of the technique 'of course', 'we know', 'thus', 'obviously', and 'naturally'. We read in the Introduction 'from the point of view of the neurotic it seems an injustice that our social life is so organized that only the healthy and the able are an integral part of it, and that the weak are automatically excluded . . .'

' . . . a critical and directive tendency in the child himself, which is the beginning of the Super-Ego in him ' (p. 10). 'The Id is the chaotic reservoir of all instincts, and the center of all psychic energy. . . . These three forces must eventually be brought into constant harmony . . . ' (p. 11). 'Proper sublimation is the way through which instinctive urges should be incorporated with the person's make-up' (p. 14). ' . . . the childhood fantasies find their outlet in play, the fantasies of puberty lead to masturbation and continue because masturbation is the introduction to heterosexual life. Psycho-analysts have come to the conclusion that infantile masturbation is essential for the establishment of the genitals as the leading sexual zone. . . . The period of masturbation during puberty is equally necessary. This period weakens the feeling of guilt (castration fear), which has been left from childhood fixation ' (p. 17). 'I have said that masturbation during the period of puberty will lead to the choice of a normal sex-object ' (p. 18).

'The psycho-sexual development of a woman bears the scars of a series of injuries: weaning, the change from the first love-object (the mother) to the father, puberty with its menstrual shock, defloration, and the fear of childbirth. All these are complications, and the tendency to neurotic reaction is therefore greater in women than in men ' (p. 99). 'Although she disliked it, the practice of *fellatio* gratified her unconscious need for a continuation of dependence, which in its earliest form is the dependence on the mother (the breast). It also satisfied her childish wish for the possession of a male sex organ, which, at one phase of development, is replaced by the wish for having a child from the father. This was really the point at which her female character formation was disturbed ' (p. 106).

The psychopathology of woman is discussed in Part II. under 'Difficulties in Female Character Formation', 'The Wish-Fulfilment Type', 'The "Revenge" Type', 'Hysteria Characters', and 'Psycho-sexual Infantilism'.

There is a chapter entitled 'Crime in Fantasy and Dreams and the Neurotic Criminal' and one on 'Technique and Therapy'. 'The relationship that is established between the patient and the person of the analyst produces a close connexion between the emotional life of the patient and the analytical situation. What we know as *transference* is this emotional tie between the patient and the analyst; it is a repetition of the childhood dependence on the parents; it provides the mechanism for "working through" the emotions by helping the patient unearth the unconscious memories and emotions that were attached to the parents; for example, the expectation of being loved as compensation for carrying out their demands. On the other hand, the fact that the analyst remains "impartial" automatically brings about frustration of these cherished expectations, which is a repetition of the frustration of the expectations bound up with the parents, and the suppression of the reaction to it. This produces what we call resistance in analytical procedure' (p. 163), and so on. This is one of the many books that will not affect culture-history.

Harry Stack Sullivan.

★

*The Commonsense of Dreams.* By Henry J. Watt, D.Phil. (International University Series in Psychology. London: Humphrey Milford, Oxford University Press, 1929. Pp. 212. Price 13s. 6d.)

The author of this book was a brilliant experimental psychologist whose death at the untimely age of forty-six has been widely deplored. The book is prefaced by a sympathetic history of his life, written by Shepherd Dawson, together with the bibliography of his published works.

The present volume is published four years after Professor Watt's death, and we are afraid it will not have the effect of heightening his reputation. Essentially it consists, as the very title suggests, in the familiar attempt to explain away the interest taken by psycho-analysis in the study of dreams, the object being to discount the significance of any discoveries purported to have been made by this method. This remark is substantiated by the following quotations: 'This book shows that dreams are related to the preceding work of the waking mind in a generally simple way and it maintains that no new psychology at all is required to bring the fruits of psycho-analysis under the scope of the old theory of association, so potent in British mental philosophy of past centuries, if only we extend the accepted data of the mind to include not only sensations and ideas, but also attitudes and urges. By this I do



not mean, of course, to declare that associationism is all the psychology we can ever want. I mean only that it is good enough for the problems of psycho-analysis. And since associationism is already a part of our everyday mental philosophy, that is to say, when we see it from the right point of view, common sense is all the theory or all the psychology that psycho-analysis needs. Scientific psychology, at least, needs no theoretical extension to accommodate psycho-analysis. And there is no other psychology than the scientific kind' (p. xv). 'The fantastic laws and mechanisms of "psychoanalysis"' (p. 53). 'But we have no reason to suppose, as Freud and his followers do, that the dream contains or "disguises" some other processes of mind, which may, therefore, be said to be simultaneously attacking the process of sleep' (p. 152). 'The theory of the adjuvance of dream to sleep is surely a product of the perverse theory that the conflicts implied by dreams are present during and behind the dream itself, as it were, as its "latent" content' (p. 157). 'As a process of thought the dream is in no essential way different from the ordinary thinking of the waking mind, however much the two apparently may differ as large complexes of process' (p. 158). 'The less we talk about unconscious mind the better. Let us observe whatever mind may be before us, analyse it well, and infer from it what we can. . . . Anything else is not only myth, but an offence to the reason and good-will of the analytically trained mind. We must be as loath to believe in ghosts and bogles in the spirit within as in the world without us' (p. 182).

The positive contribution Professor Watt proposes in the study of dreams is that they be recorded as expressions of reluctance to deal with various waking problems, and he interprets a number of dreams in the light of this quite arbitrary view. He evidently belongs to the group of psychologists who have been vaguely stirred by the findings of psycho-analysis to such an extent as to make it necessary for internal reasons to deal with them. Doubtless to his own satisfaction, he comes to the conclusions that the unconscious can be disregarded, and that dreams do not disguise any latent content. We need not discuss in detail the various arguments he advances, which have so often been dealt with by psycho-analysts. It would be kinder for his reputation to let the book 'surely gently die'.

E. J.



*Anorexia Nervosa.* A Discussion by Drs. W. Langdon Brown, F. G. Crookshank, J. C. Young, George Gordon and J. C. Bevan Brown. (London: The C. W. Daniel Company, 1931. Individual Psychology Publications. Medical Pamphlets, No. 2. Pp. 63. Price 2s. 6d. net.)

This pamphlet summarizes the views of its authors on anorexia nervosa and allied conditions. While differing on some points, all lay stress on the

ætiological importance of adverse external environment and agree that the symptoms concerned have the character of protest against authority. Thus Dr. Langdon Brown finds such disorder to be a pathological manifestation of the detachment of the individual from the parental authority, related to the general question of infantilism and having affinity with dementia præcox. Dr. Crookshank regards the symptoms as invariably a protest against parental authority. He considers they may be adequately treated by engaging in the family struggle on the patient's side and helping to secure the measure of independence desired. The patient is the central figure in a family pattern of the Abraham-Isaac type, and the first essential is to break up this pattern. It is doubtful how far sexual difficulties are involved, but 'analysis by the Freudian technique is neither advisable nor required'. Dr. Young agrees that anorexia is always a reaction to some obstructing authority, while Dr. Gordon is of opinion that 'if there is any single and simple mechanism involved in this condition—probably an unwise assumption—then the mechanism is one of protest against authority', parental or otherwise. On the other hand, Dr. Bevan Brown thinks the reaction against authority, while of the greatest importance in sustaining the symptoms, is really secondary to disappointment in the craving for love. He cites in support of this view the case of an unwanted child who fell ill after the failure of a love affair, a case which presented many psychotic features. Dr. Crookshank's historical survey and the illustrative case material will probably be of most interest to analysts.

Marjorie Brierley.



*Sin and Sex.* By Robert Briffault. With an introduction by Bertrand Russell. (London: George Allen & Unwin, 1931. Pp. 228. Price 7s. 6d.)

The distinguished author of *The Mothers* here sets himself the task of expounding in popular form the taboo-like nature of our conventional morality of sex, and he succeeds well, for no reader of the book can fail to be impressed by the utter lack of any ultimate foundation in reason or utility for the dictates of this morality. This does not, of course, prevent our moral code from being *incidentally* useful. But this incidental utility, though it may be seized upon for purposes of rationalization, is psychologically at best a very secondary motive. The best ultimate explanation of why we disapprove of conduct which violates convention is that it is 'disgusting', 'vulgar', 'indecent', 'shocking', and these are—as Mr. Briffault makes abundantly clear—the present-day equivalents and derivatives of savage taboo. In so clearly and attractively setting forth this fact, Mr. Briffault has carried out a useful piece of work. For until the persistence, the limitations, and the disadvantages of taboo have been

more fully recognized, there can be no general advance towards the reality principle in those all-important fields which are still affected by taboo.

It is also, as Mr. Briffault very justly points out, important to realize the tendency there is to find rationalistic and scientific justifications for taboo, a tendency which he considers to be strikingly manifested in what he calls Noah's Ark biology, and Adam and Eve anthropology, both of which seem to bolster up the institution of monogamy, by wholesale distortion, selection, or misreading of the facts. Whether the particular attacks on the Adam and Eve school are justified or not, there can be little doubt that the danger to which Mr. Briffault points is a real and insidious one, against which the anthropologist—above all others—must be on his guard. Since science has become (at least in theory) the ultimate criterion of truth, there is an ever-increasing desire to seek scientific justification for beliefs and attitudes that we are unwilling to abandon.

To the psychologically minded reader, the book would have been more interesting and satisfying if it contained a more adequate account of the origin and function of taboo as a mental and social mechanism. It is in such matters that there becomes apparent the need for that psychological foundation for anthropology which psycho-analysis alone seems able to provide. To take one instance. On p. 98 Mr. Briffault says: 'The tabus of bodily pudicity, far from arising out of a sense of shame in regard to sexual functions, owe their origin on the contrary to the extreme value set by primitive humanity on their fulfilment. The custom of concealing the sexual organs, male or female, is found to be preceded at all lower levels of culture by endeavours to protect them from injurious magic influences, more especially the evil eye. . . . Those superstitious customs which have given rise to the decency which our policemen take it upon themselves to enforce for the safeguarding of public morals are originally adopted for the purpose of safeguarding the flourishing of fornication'. But the mere fact that an organ or a function is valuable is surely insufficient to account for the disproportionate fear of its being injured. If, however, as seems inevitable, we regard 'the evil eye' as a projection of influences *in* the mind, we have to recognize that the fear of an external danger corresponds to the presence of an internal danger; that, in fact, the ultimate cause of the fear is the presence of guilt or need for punishment. It is this presence of guilt associated with the organs of pleasure which constitutes the ultimate problem. It is only with the unearthing of this buried guilt that we can hope to achieve a final solution of the problems of taboo—either on the theoretical or historical, or on the practical and ethical sides.

From a writer of Mr. Briffault's knowledge we might expect a great number of interesting and enlightening remarks on many problems of



detail, and these we find indeed in great abundance. Perhaps the most far-reaching of his minor contributions is his theory of love. He believes that love and sex were originally things apart. Love is more a matter of communal feeling than of attitude towards a sexual partner. While savage life, he thinks, provides an adequate outlet (without a given tribe) for love in this sense, it is starved in, what he regards as, our present predatory and individualistic civilization. The civilized man's need for loving has therefore become a ruling passion. Sex itself is another ruling passion. 'It is a psychological law that ruling passions tend to fuse', and thus 'the two ruling passions, the longing for trustful affection and the passion of sex can become fused in the civilized man'. However, that is not the whole story, even on Mr. Briffault's own showing, for he goes on to elaborate his theory thus: 'When the wretched civilized man, even the most hard and cynical, reads in the eyes of the woman whom he desires that he need not be on his guard with her, that he can trust her, that she loves him, the naturally affectionate desires of his nature well up from him. The look in the woman's eyes recalls to him his mother, almost the only human being whom he could trust, who, he knew, would not betray him, and endeavour to get the better of him. He is overcome with tenderness' (p. 156). It is possible that psycho-analysis might come to the help of anthropology in this matter also.

In his desire to set his case concisely and strikingly, Mr. Briffault sometimes makes statements that are at best questionable or in need of further evidence—at any rate in the somewhat sweeping form in which they are put. It is doubtful whether any sexologist would agree that 'even to the highly civilized female the male becomes utterly repellent (from the time of impregnation) until her offspring has become independent of her care' (p. 160). The biological evidence in favour of the view that 'every function and every fibre and every cell of the male is constituted after a masculine pattern; and every function, every fibre and every cell of the female is feminine' (p. 143) is not easy to produce. Brain physiology would be hard put to it to prove that 'every movement of a woman's person is feminine. And although the most amateur students of handwriting would probably agree that 'a woman's handwriting is clearly distinguishable from a man's', the world's most eminent graphologist has recently remarked that the ability to distinguish in every case the sex of a given writer is so far the exclusive prerogative of the amateur.

These latter points, however, are largely matters of detail and detract but little from the general value of the book which lies in the fact that a very important point of view has been attractively, cogently and clearly stated. It is difficult to imagine that a person of reasonable and unprejudiced mind could read this book without being profoundly impressed with the unreason, the absurdity, and the cruelty of our present moral

outlook. It is a work which is admirably calculated to produce discomfort in the conventional and indignation in the unorthodox, and this is the purpose, we imagine, which it was intended to fulfil.

J. C. F.



*The Mastery of Sex : through Psychology and Religion.* By Leslie D Weatherhead, M.A., assisted by Dr. Marion Greaves, M.R.C.S. (Engl.), L.R.C.P. (Lond.). With Forewords by the Rev. A. Herbert Gray, D.D., and J. R. Rees, M.A., M.D., D.P.H., and an Epilogue by Principal W. F. Lofthouse, M.A., D.D. (London : The Student Christian Movement Press, 1931. Pp. 253. Price 5s.)

The critic is disarmed by the naïvety of this book. *The Mastery of Sex* is at last brought within compass, for the author boldly embarks on the following lines : ' This book has a presumptuous aim. It aims at dealing with every sex problem a man or woman is likely to meet. It seeks to combine accurate science with applied religion ' (p. xxii.). After this, what more is there to say ? We note only that he has greatly lightened his task by making no reference to psycho-analysis or to Freud.

E. J.



*A Bibliography of Sex Rites and Customs : An Annotated Record of Books, Articles and Illustrations in all Languages.* By Roger Goodland. (London : George Routledge & Sons, 1931. Pp. 752. Price 63s.)

This book is a record of some 9,000 bibliographical references to sexual ideas, rites and customs, with special reference to those of savage races. It is therefore bound to be of great value to the ethnologist and sexuologist.

One can feel nothing but gratitude to an author who has expended so much labour in the service of other workers. But it is also pertinent to point out the difficulties that beset the scholar's path. If for instance we confine ourselves, as is appropriate in this JOURNAL, to the psycho-analytical aspects of the bibliography, we note the following facts. Listed under the name of ' Psychoanalysis ' we find references to fourteen names. The first of them, A. Brett, refers to a paper on Greek coins published by the American Numismatic Society. Some of the other writers, e.g. Wells and Wohlgenuth, have only the most remote association with psycho-analysis. One of them, Money, presumably refers not to the R. C. Money of the text, but to R. H. Money-Kyrle, who is incorrectly listed in the index as R. E. Money-Kyrle. Among the striking omissions in the list are the names of Abraham, Ferenczi, Freud ! and Rank, a fact on which it is superfluous to comment.

E. J.

*The Cat in the Mysteries of Religion and Magic.* By M. Oldfield Howey. (London: Rider & Co. 1931. Pp. 254. Price 15s.)

This is a book of great value to the folklorist and psychological anthropologist. The author traces the various beliefs and customs relating to cats through the ages from ancient Egypt to current superstition. All aspects are dealt with, there being chapters of 'Freya and her Cat', 'Witches in Cat Form', 'The Cat in Paradise', 'The Cat's Nine Lives', 'The Corn Cat', and so on. One chapter is entitled 'The Cat as Phallic Symbol', but the author's total ignorance of modern sexuology is shown by the first sentence: 'It seems probable that the Cat first became regarded as a Phallic Symbol because she was held to be the terrestrial representative of the Sun and Moon, and therefore of the god or goddess ruling mundane generation and conception through the occult influences attributed to those orbs' (p. 210).

The author of *The Discoverie of Witchcraft* is given as Reginald Scott (p. 47), instead of Scot, being perhaps confounded with Sir Walter Scott.

E. J.



*The Psychology of Men of Genius.* By Ernst Kretschmer. (International Library of Psychology, Philosophy and Scientific Method. Kegan Paul, 1931. Pp. 256. Price 15s.)

In contrast to so many scientific books, the volume under review can be appreciated equally by the specialist and by the lay reader. It falls neither into the Scylla of popular distortion and over-simplification nor into the Charybdis of scientific jargon. The book is divided into three parts, preceded by an introduction in which the author defines genius. The first part is an analysis of the conditions which produce genius; in the second part, the lives of some men of genius are examined and used to illustrate the laws governing genius formulated in the earlier chapters; the third part is devoted to an interesting collection of portraits of outstanding philosophers, scientists, and poets to show the tendency of these to fall into two physical types, the pyknic and the leptosome.

Kretschmer gives the title of genius to 'the producer of personally stamped special values'. He finds that the incidence of psychosis and psycho-neurosis among men of genius and their families is very high, but that their case is exceptional, for instead of resulting in ineffectiveness, the psychopathic tendencies lead to the development of genius, and in fact are an intrinsic and essential part of it.

The second chapter more particularly, and to some extent the whole book, deals with the relation of genius to sublimation, showing how the instinctive factor, being modified, becomes the driving force in the production of art, etc.: 'He who becomes a genius does so only because he is forced, because inner tensions are driving him constantly to new output'.



With this the psycho-analyst will be fully in accord, but he will disagree with our author concerning the factors which produce the inner tensions. Kretschmer takes a too superficial view of the mind and considers as basic and hereditary, character traits which are really the complex resultant of the interaction of instinctive tendencies and the environment. He, therefore, fails to analyse further the psychological constellations which underlie these inner tensions and only hints at the unconscious anxiety patterns that are the motive force to sublimation and its highest product, genius, when he says : ' They are certainly men of strangest inner contradictions of character, extending to the moral realm. Their courage and will-power is not something elementary, but the result of complicated and varied psychological mechanisms '.

Although there is nothing very new in this work for the psycho-analyst, it is, nevertheless, valuable and interesting in amassing new facts, and in that the author, from a very different standpoint, reaches conclusions very close to those arrived at through psycho-analysis.

Sybille L. Yates.



*The Case of Mrs. A. (The Diagnosis of a Life-Style).* By Alfred Adler. (C. W. Daniel Company, 1931. Individual Psychology Publications : Medical Pamphlets, No. 1. Pp. 48. Price 2s.)

In this little book Adler deals with a case history in the manner of a schoolboy's ' unseen ' ; reading sentence by sentence and giving a free translation in terms of individual psychology, which, according to the Editor's introduction, can be equated with common sense. Mrs. A. is a married woman of thirty-one and has come for psychotherapeutic treatment, so ' there could be a problem of marriage, of children, perhaps also a problem of income in these times '. And so it goes on : rather obvious guesses of sufficiently wide scope and general nature to give a high probability of being borne out. But for this kind of common sense why bother with the resounding title of Individual Psychology !

Where this work varies from the examinee's ' unseen ' is that there is no examiner to check its correctness ; and its accuracy comes seriously into question when we find the reality of guilt being brushed aside for the sake of the Will to Power. According to Adler, guilt and repentance are not real, they are artifices for the gaining of power. In the absence of any other examiner, must we not turn to the psychopath himself, who finds the feeling of guilt to be very real and very difficult to deal with ?

Sybille L. Yates.



*Law and the Modern Mind.* By Jerome Frank. (New York : Brentano's, 1930. Pp. 362. Price 21s.)

The idea that law is fixed and unchangeable, rather than fluid and

changing, is a 'basic myth' due to the law's position in the community as a father-substitute. This is the theme developed here by Mr. Frank. He discusses interesting questions such as legal verbiage, the judging process, fictions, and the jury, but although modern psychological ideas, chiefly derived from the works of Piaget on children, are made much use of, the book is chiefly written from the point of view of academical jurisprudence, and for this reason fails to deal adequately with the psychological aspect of its material. Mr. Frank is chiefly concerned to develop a mature realistic attitude which regards the law as being in a state of continual flux and is the antithesis of the attitude which clings to the myth referred to above. With this end in view he quotes and criticizes a large number of eminent jurists whose writings have borne on the subject; to such an extent, in fact, that his work threatens to become overloaded with extracts from other authors and his comments thereon. There are, however, undoubtedly some exceedingly fruitful ideas in the book which, if developed from the psychological point of view, might be expected to yield much that is of interest.

Roger North.

# BULLETIN OF THE INTERNATIONAL PSYCHO-ANALYTICAL ASSOCIATION

EDITED BY

ANNA FREUD, GENERAL SECRETARY

ANNOUNCEMENTS BY THE CENTRAL EXECUTIVE

## I. PROFESSOR FREUD'S SEVENTY-FIFTH BIRTHDAY

On May 6 of this year, 1931, Professor Freud attained the age of seventy-five. His expressed wishes and the state of his health obliged us to refrain from celebrating the occasion as festally as our inclinations and our feelings of respect and gratitude to him had led us to intend. The writer personally conveyed to him the greetings and congratulations of the I.P.A.

A small circle of supporters of psycho-analysis, impelled by similar motives, had subscribed a sum of money, which exceeded 50,000 Marks and was placed at his disposal for psycho-analytical purposes on this date.

M. Eitingon.

## II. THE CONGRESS

In view of the serious internal situation in Germany, the duration and extent of which cannot yet be predicted, the Central Executive resolved to postpone until next year the Twelfth International Psycho-Analytical Congress which should have assembled at Interlaken, September 7-11, 1931. The future date will be arranged with the Branch Societies and duly communicated in good time.

M. Eitingon.

Anna Freud.

## III. FIFTIETH BIRTHDAY OF DR. MAX EITINGON

In the name of the Central Executive of the International Psycho-Analytical Association I have the honour of conveying to our beloved President our most heart-felt congratulations on the occasion of his fiftieth birthday. Quite recently Professor Freud paid a tribute to the magnificent services rendered by Dr. Eitingon to our Association, in the promotion of psycho-analytic training in general and the creation of the model Institute in Berlin. I would therefore remind you of the appreciation contained in the preface to *Zehn Jahre Berliner Psychoanalytisches Institut*, to which I can add but little on this occasion. We, as fellow-members of the Central Executive, can testify unanimously to the unostentatious and fruitful work done by Eitingon in composing the differences, small and great, which have arisen within the Association; I need only refer to the agreement ultimately achieved amongst all the Societies on the subject of lay-analysis. Brought, as we are, into intimate contact with him in



our professional work, we think to-day of his lovable personal qualities, his readiness to help and, last but not least, of the delight it has been to us to be in constant touch with a man whose mental attainments far transcend any mere professional erudition. *Ad multos annos!*

S. Ferenczi.

#### IV. REPORTS OF PROCEEDINGS OF SOCIETIES

##### AMERICAN PSYCHO-ANALYTICAL ASSOCIATION

The Twenty-sixth Meeting of the American Psycho-Analytical Association was held at the Royal York Hotel, Toronto, Canada, on the evening of June 4 and the morning of June 5, 1931. The evening meeting was called to order by the President, Dr. A. A. Brill. The minutes of the preceding meeting and the treasurer's report were read and approved. Dr. R. H. Hutchings presented the report and recommendations of the Council. Dr. Ernest Jones was elected to Honorary Membership, in recognition of his interest in the organization of the American Psycho-Analytical Association and his meritorious achievements in the field of psycho-analysis. Drs. Leo Bartemeier of Detroit, Thomas M. French of White Plains, New York, Lewis B. Hill of Baltimore, David Levy of New York City, Eleanora Saunders of The Sheppard and Enoch Pratt Hospital, Towson, Maryland, and Stewart Sniffen of New York City were elected to Membership, and Professor Harold D. Lasswell of the University of Chicago was elected to Associate Membership. John Holland Cassity was dropped from the list of members. The officers elected for the ensuing year were, A. A. Brill, *President*, Smith Ely Jelliffe, *Vice-President*, Ernest E. Hadley, *Secretary-Treasurer*, and Harry Stack Sullivan for the three year term on the Council. A scientific programme followed the business session :

(1) Dr. Gregory Stragnell : 'Conceptual Images in Relationship to Time, Space and Energy'.

(2) Dr. Paul Schilder : 'Notes on the Psycho-Analysis of Psychogenic Depression and Melancholia'.

At the joint session with the American Psychiatric Association on the morning of June 5, the meeting was opened with Dr. Walter M. English in the chair. The following programme was given :

(1) Dr. A. A. Brill : 'Abraham Lincoln as a Humorist'.

(2) Dr. C. P. Oberndorf : 'Psycho-Analysis of Married Couples'.

(3) Dr. Harry Stack Sullivan : 'The Modified Psycho-Analytic Treatment of Schizophrenia'.

(4) Dr. Clinton P. McCord : 'The Status of Child-Analysis in America ; Its Significance to the General Psychiatrist'.

An exceptionally large audience gathered, in spite of the fact that the meeting concluded a five days' session of the American Psychiatric Association.

ciation. A pre-assembly objection was raised against the presentation of Dr. Brill's paper on Abraham Lincoln by one who has never played a part in the organization. This objection was discussed widely in the newspapers throughout the country. However, the formal protest was tabled by the Council and the paper read as written.

Ernest E. Hadley, M.D.

#### BRAZILIAN PSYCHO-ANALYTICAL SOCIETY

As already reported, the Brazilian Psycho-Analytical Society was established in 1927 in Sao Paulo on the initiative of Durval Marcondes. Mr. Porto-Carrero now sends us the following information about the history of the psycho-analytical movement in Brazil since 1927 :

1928. Courses on Psycho-Analysis (23 meetings) given by J. P. Porto-Carrero and Deodato Moraes at the Brazilian Association for Education in Rio de Janeiro.

Publication of *Psychoanalyse Educacao*, a small book for educators, by D. Moraes.

Extension of the Brazilian Psycho-Analytical Society, which now comprises two branches, one in Rio, the other in Sao Paulo. President for two years : Professor Franco da Rocha, Sao Paulo.

Publication of the first number of the *Revista Brasileira de Psychanalyse*.

1929. Courses on Psycho-Analysis in Sao Paulo, given by D. Marcondes.

Four sessions on Psycho-Analysis in the course on Advanced Neuro-Psychiatry in the Medical Faculty of the University of Rio, given by C. Ayrosa and Porto-Carrero on the subjects : Introduction to Psycho-Analysis ; Psycho-Analysis and Forensic Medicine ; Psycho-Analysis of the Neuroses.

Latin-American Congress for Neuro-Psychiatry and Forensic Medicine : There was a section for Psycho-Analysis, in which reports were given by D. Marcondes (Sao Paulo), Artur Ramos (Bahia), Murillo Campos (Rio) and Porto-Carrero.

Publication of books by Porto-Carrero : *Ensaio de Psychanalyse* and *Psychanalyse et des applications medico-légale*, Rio, 1929.

1930. Psycho-analytical seminars on Freud's works, led by Murillo Campos and C. Ayrosa.

Compilation of a Brazilian psycho-analytical glossary.

At the Brazilian Congress for Neuro-Psychiatry : Reports by D. Marcondes (Sao Paulo), Murillo Campos (Rio), C. Ayrosa (Rio) and Porto-Carrero.

Publications by Porto-Carrero : ' Ce que nous attendons de nos fils ', *Schola*, Nr. 3, 1930, Rio. ' Education sexuelle ', *Archive d'Hygiène mentale*, Nr. 3, 1930, Rio.

Mr. Porto-Carrero also gave a lecture at the Women's Christian Asso-

ciation on the subject: 'Advice for Mothers' (sexual education), and a lecture at the Institute of Barristers, Rio, on 'A psycho-analytical contribution to criminal law'. Since October, 1929, he has held the Chair for Forensic Medicine in the Faculty of Law of the University of Rio as Deputy Professor, has included Psycho-Analysis in his syllabus, and gives his course on Forensic Medicine from the point of view of Psycho-Analysis. In the year 1930 he also sent to the Congress of Mental Hygiene at Washington his report on 'Sex and Culture'.

1931. Professor Briquet, Sao Paulo, translated Ernest Jones's *Über Psychoanalyse* into Portuguese. Professor Franco da Rocha published *Die Lehre Freuds*. At the request of the Brazilian Psycho-Analytical Society and the Brazilian League for Mental Hygiene, Porto-Carrero gave a Course of lectures on Psycho-Analysis. In the new law about university teaching, a course on Psycho-Analysis is provided for in the Medical Faculties.

It has unfortunately not been possible to continue the publication of our Journal.

#### BRITISH PSYCHO-ANALYTICAL SOCIETY

*Second Quarter, 1931*

##### *Scientific Meetings*

*April 31, 1931.* Miss Barbara Low: 'Recent psycho-analytical Activities in Germany'. An account of a recent visit to Berlin, describing the various scientific and other activities of the Berlin Society; in particular the organization of the Training Institute and special public activities of individual members; concluding with some account of various sociological and pedagogic aspects of psycho-analytical work in Germany.

*May 6, 1931.* Symposium on 'The Precipitating Factors in Neurotic Disorder'. (a) Discussion opened by Mr. Strachey, who gave a short *résumé* of the historical development of Freud's views on the subject, continued by the following:

(b) Miss Chadwick: Demands for increased adaptation which are intolerable and to which the personality can make no adequate healthy adjustment, coming from endopsychic needs for instinctual gratification, or repression at the instance of the id on the one hand and the super-ego on the other, together with the alliance and conflicts arising from the ego in relation to both, as well as from cultural or environmental demands, or the neurotic strivings for gratification from persons in the environment. Change in symptom-formation giving the impression of sudden onset of neurosis can be furnished by intolerable deprivation of impulse gratification which cannot be assimilated, adjusted to, or cancelled by substitute gratification, as well as a fierce struggle to obtain restoration of the gratification.



(c) Dr. Millais Culpin : Need to distinguish between symptoms and disability or breakdown. Researches upon people at work had showed that less than half the population were free from symptoms as elicited by superficial examination. In war cases as in industry—in mining, deep sea diving, telegraphy, etc.—it could be laid down that when disability arose there was an inverse relation between predisposition and stress. If a symptom could find expression without interfering with happiness or efficiency (as in a scientific worker with a pathological urge to accuracy and repeated verification), then no disability need appear; in a telegraphist with such an urge, cramp is inevitable. In so-called traumatic cases suppression of the unpleasing experience was often found, and there was scope for the old method of abreaction. When sexual trauma causes an immediate neurosis a deep significance is sometimes manifest on superficial questioning; in a case of telegraphists' cramp appearing within a few hours of a crude sexual experience a symbolic meaning was obvious, and in any case of occupational cramp, analysis showed a wealth of meaning in the specific symptom. Many neuroses of sudden onset could be checked by informed treatment; but the patient rarely had the fortune to meet it and was helped on the downward path by the ignorance enshrined in such phrases as 'traumatic neurasthenia', which the speaker regards as a prostitution of scientific terminology.

(d) Mrs. Klein : The external factors in neurosis, whether the general conditioning influences or the actual precipitating events, derive their significance from the extent to which they confirm or deny in real experience the child's earliest and most dominating anxiety-situations, with their connected phantasies: these anxiety-situations themselves arising from constitutional factors, mainly from the destructive components in the instinct-impulses connected with the specific erotogenic zones. Two cases illustrate these points in detail: (1) A boy of four, (a) had not been breast-fed, his oral and urethral sadistic tendencies being thus greatly stimulated, the boy being left without a helpful mother-imago, while (b) his elder brother forced fellatio upon him, thus confirming his fear of the sadistic penis. These were the conditioning external factors. The precipitating factor was the boy's first experience of school, the presence of the boys in mass awakening his deepest anxiety of an internalized and dangerous penis. (2) A man whose neurosis broke out on recovery from an attack of dysentery in which his nurse was negligent and cruel, this following on a long war experience in the front-line trenches. The dysentery confirmed his dread of an internalized penis (urine and fæces), which had been stimulated by trench warfare; and the unkindness of the nurse repeated early frustration-situations at the breast, re-activating his 'bad' mother-imago.

(e) Miss Sharpe : In adult cases where a clinical picture of precipitation

presented itself, psychical factors could be correlated with the specific environmental circumstances before or at the time of the breakdown. In some cases the environment at the time of precipitation paralleled in some specific way an earlier one, in childhood, when psychical reactions were first correlated with specific events. The id wishes are common to all. The quantitative element in the endopsychic factors is incalculable and individual. The environment within which and upon which those incalculable endopsychic factors will operate is a specific one. Had his environment been different for any individual, the psychical difficulties proceeding from his id wishes, the incalculable quantitative factors, might not have been less difficult, but would have been different. That difference which makes individuality must be appraised by the correlation between those endopsychic factors and an individual environment. The most difficult task in analysis lies with those for whom in earliest years instinct-tension was heightened in consequence of an untoward environment which in differing ways brought a consummation of stimuli to bear upon the young child.

(f) Dr. Inman : In an ophthalmic practice, the most common precipitating cause of neurosis has been found to be the loss, either actual or threatened, of a love or hate object. The influence of this loss may not be felt immediately. Anniversaries and other rhythmic reminders of dates of great emotional significance, especially those concerning the important biological processes of birth, marriage and death, have proved patent in provoking the outbreak of symptoms, and suggest that adequate explanation will involve a consideration of the time element, as mentioned in Freud's *Beyond the Pleasure Principle*.

May 20, 1931. Short Communications : (a) Dr. S. M. Payne : 'Anxiety Manifestations associated with the Feminine Castration Complex and allied narcissistic Danger-Situations'. The part played by procreation in relieving or intensifying anxiety attacks, according to the type of phantasy which is realized by conception.

(b) Dr. Glover : 'The Therapeutic Effect of Inexact Interpretation'. A discussion of possible mechanisms whereby therapeutic results are obtained by analysis even when a specific set of phantasies remains under repression. The view that incorrect interpretation acts by providing a substitute formation, i.e. an ego-syntonic phobia : classification of pseudo-analytical suggestion on the basis of this view. Pseudo-analytical suggestion (ego-syntonic hysteria) contrasted with pure suggestion which establishes an ego-syntonic obsessional system.

June 3, 1931. Dr. Melitta Schmideberg : 'The Psychology of Persecutory Ideas'. (Published in this JOURNAL.)

June 17, 1931. Miss Chadwick : 'Notes on the Psychological Significance of Menstruation'. An historical survey of the subject ; taboos,

superstitions, early medical observations, astronomical theories, and in particular the relationship to witchcraft. Menstrual cycle in childhood was then discussed : (a) from the point of view of symptomology ; (b) the earliest date of understanding the existence of menstruation ; (c) the effect of puberty. In conclusion, attention was drawn to the part played by menstruation experiences in psychological disturbances in young female adults, and in those approaching or passing through the climacteric.

Edward Glover,  
*Scientific Secretary.*

*Business Meeting. Third Quarter, 1931*

*July 8, 1931. Annual Meeting.* The reports of the Scientific and Business Secretaries, Treasurer, and Librarian were submitted to the meeting and approved, and the Balance Sheet for 1930 was passed.

The following officers were elected for the ensuing year :

*President*, Dr. Ernest Jones.

*Scientific Secretary*, Dr. Edward Glover.

*Business Secretary*, Dr. Sylvia Payne.

*Treasurer*, Dr. Douglas Bryan.

*Members of Council*, Dr. Eder, Mrs. Riviere, Dr. Stoddart.

*Training Committee*, Dr. Glover, Dr. Jones, Mrs. Klein, Dr. Payne, Mrs. Riviere, Miss Sharpe.

*Librarian*, Miss Barbara Low.

A resolution was passed by the meeting that the Library Sub-Committee should consist of four members or associate members (formerly three).

*Library Sub-Committee*, Miss Chadwick, Miss Low, Dr. Stoddart, Mr. Strachey.

The Associate Members nominated by the Council were re-elected.

Dr. Fairbairn was elected an Associate Member.

Two Associate Members, Dr. Franklin and Dr. Karin Stephen, were elected to Membership.

A grant of £60 was made to the Library Fund from the funds of the Society.

*Changes of Address*

Dr. Brierley, 11, Nottingham Place, W. 1.

Dr. Fairbairn, 18, Lansdowne Crescent, Edinburgh.

Miss Barbara Low, 59, Queen Anne Street, W. 1.

Dr. Cyril Wilson, 5, Devonshire Place, W. 1.

Dr. Sybille Yates, 11, Nottingham Place, W. 1.

S. M. Payne,  
*Business Secretary.*



## DUTCH PSYCHO-ANALYTICAL SOCIETY

*First and Second Quarters, 1931**January 24, 1931. (Amsterdam.) (a) Business Meeting*

*Re-election of the Council* : J. H. W. van Ophuijsen, *President* ; A. Endtz, *Secretary* ; Dr. F. P. Muller, *Treasurer*.

*Training Committee.* Professor Dr. G. Jelgersma resigned from this Committee, to which two additional members were appointed. It is now constituted as follows : J. H. W. van Ophuijsen, F. P. Muller, Dr. S. Weyl, Dr. A. J. Westerman Holstijn and A. Endtz.

(b) Dr. S. Weyl : 'Melancholia and Self-Punishment'. Various dreams in a case of melancholia, shewing the great importance of the mechanism of self-punishment. Relative insignificance of mechanisms of introjection.

*February 28, 1931. (The Hague.) (a) J. H. W. van Ophuijsen* : 'Psycho-Analytical notes on Women's Dress'. The peculiarities of fashion—rapid change, sudden imitation after initial resistance, influence on the mutual relations of women, choice of material, influence on men—explained as manifestations of the unconscious, narcissistic wish to take possession of the coveted phallus. Male susceptibility to feminine fashions : fetishistic attitude towards modish dress.

(b) A. Endtz : 'Clinical communications'. (1) Basis of modern psychiatric classification of mental disease : constantly changing, more or less arbitrarily selected clinical entities. Correct basis : (a) level reached in libidinal regression, taken in conjunction with its particular form of punishment-gratification ; (b) level attained in the development of the sense of reality. A clinical case-history, reviewed from this standpoint : psycho-pathological diagnosis of anxiety-hysteria, based on (a) genital fixation to the parents, a single symptom representing the gratification of the need for punishment (castration) and of the wishes of the id ; (b) regression of the sense of reality to the phase of projection. Rapid recovery, in spite of external appearance of schizophrenia. Application of Robert Wälder's principle of manifold function<sup>1</sup> to projection. Delusion represents an unsuccessful endeavour to re-establish relations with the previously abandoned outside world (Freud). Similar mechanism in hallucination : a spontaneous attempt at recovery. (Cf. Freud : Schreber analysis.)

*April 18, 1931. (Oestgeest.) (a) A. Endtz* : 'Clinical communications' (continued). (2) Another case-history with a clinical picture resembling schizophrenia. Diagnosis : conversion-hysteria. Favourable prognosis

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<sup>1</sup> *Internationale Zeitschrift für Psychoanalyse*, 1930, s. 285.

justified by rapid recovery. Corroboration of two observations by Helene Deutsch <sup>a</sup> (a) displacement of the libidinal cathexis from the repressed genital to some other organ is accompanied by a similar displacement of castration-anxiety, producing hypochondria and (b) traumatic experiences in childhood influence the selection of the genitalized organs.

(b) Dr. F. P. Muller: 'Notes on Regression'. Classification of the psychoneuroses according to the position of the point of function. In psychosexual development regression is deeper in obsessional neurosis than in hysteria; in other respects the converse is the case. In obsessional neurosis substratum of hysterical symptoms belonging to an earlier phase of development (Freud). Obsessional neurosis regresses to the period of magical thoughts and words (Ferenczi), hysteria to yet earlier periods. Hysterical regression goes deeper, e.g. transitional forms between hysteria and melancholia, combination of hysteria with strongly-marked narcissism, the fixation-point in its bearing on the sexual act. Capacity for differentiation between possibility and certainty remains in obsessional neurosis; whereas in hysteria imperfect differentiation between reality and phantasy. In obsessional neurosis the ego-development outstrips that of the libido (Freud).

June 13, 1931. (The Hague.) Dr. S. J. R. de Monchy: 'Analysis of a thirteen-year-old boy, with special reference to feelings of home-sickness'. The boy suffered from phobias and obsessional behaviour, related to an idea of his father's death. Conscious attachment to his father remarkably strong; subconscious hostility and death-wishes. Consciously he hated and feared his psychically abnormal mother; subconsciously he was firmly fixated to her. The parents were separated and the boy lived with his father. The boy suffered severely from home-sickness, when parted from him and away from home, which originated in his ambivalent attitude towards his father. The difference between 'home-sickness' and 'longing' is that in the latter there is a predominantly positive attachment to the love-object, while the obsessional 'pull back' to certain persons or surroundings, met with in some children, which we call 'home-sickness', occurs only when, side by side with a conscious, positive attachment, there are markedly negative subconscious affects. In cases of home-sick children it has invariably been found that the development of the Oedipus complex had suffered disturbance. When the home-sickness was principally associated with the parent of the same sex as the subject, the ordinary Oedipus hatred was present; when the chief object of the feeling was the parent of the opposite sex, I found, in the case of boys, that negative feeling existed, because they regarded themselves as slighted and neglected by the mother. It may be merely a chance that hitherto this form of

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<sup>a</sup> *Psychoanalyse der Neurosen*, s. 73, u. 75.

'home-sickness' for the parent of the opposite sex has not been observed in girls.

*Election to Membership*: Dr. H. C. Rümke, Albrecht Dürerstraat 6, Amsterdam; Dr. P. H. Versteeg, Javastraat 3, The Hague; Dr. A. M. Blok, Wassenaarscheweg 39, The Hague.

A. Endtz,  
*Secretary.*

## FRENCH PSYCHO-ANALYTICAL SOCIETY

### *Second Quarter, 1931*

*April 21, 1931.* Dr. G. Róheim: 'Observations on the Aruntas of Australia'. In the ensuing discussion the meaning of puberty-rites was principally considered.

*May 19, 1931.* Madame Odier: 'A Contribution to the Study of the Feminine Super-Ego'. Two characteristic cases. Conclusion: It is more difficult for girls to tolerate the rivalry with the mother than for boys to tolerate that with the father; for girls do not easily detach themselves from the first libidinal object.

*June 4, 1931.* Dr. Hesnard: 'The Mechanism of Hypochondria'.

*June 16, 1931.* Dr. R. de Saussure: 'Is it legitimate to introduce a normative element into analysis?'

## GERMAN PSYCHO-ANALYTICAL SOCIETY

### *Second Quarter, 1931*

*April 18, 1931.* (1) Dr. Eitingon, referring to the untimely death of Dr. Liebermann, offered a warm tribute to his memory.

(2) Dr. Haas: 'On the treatment of schizophrenia'.

*April 23, 24, 25 and 27, 1931.* Dr. Róheim reported on the results of his researches in the South Seas and the interior of Australia.

*April 28, 1931.* Dr. Eitingon read a letter of condolence from the British Psycho-Analytical Society on the death of Dr. Liebermann.

Dr. Sachs expressed the congratulations of the Society to Dr. Müller-Braunschweig on his fiftieth birthday.

Dr. Bernfeld reported on the Congress of Psychologists at Hamburg.

Dr. Schultz-Hencke: 'The problem of unconscious fixation'.

*May 5, 1931.* (1) Dr. Sachs gave a brief appreciation of Freud's work on the occasion of his seventy-fifth birthday.

(2) Dr. Reik read his 'Congratulatory reflections on the occasion of Professor Freud's seventy-fifth birthday, May 6, 1931'.

(3) Dr. Simmel: 'Compulsion and criminality; a contribution to the psychology of murder from motives of lust'.

*May 19, 1931.* Dr. Sachs reported on his visit to Vienna on the occasion of Professor Freud's seventy-fifth birthday.



Dr. Lampl reported on the meeting of the Vienna 'Akademischer Verein für medizinische Psychologie' on the same occasion.

Dr. Simmel reported on the Congress of the Medical Psycho-Therapeutical Society in Dresden.

Short communications :

(1) Dr. Liebeck-Kirschner : (a) 'An observation on children'. (b) 'Drawings of first-form boys bearing on the topic of anxiety dreams'.

(2) Dr. Boehm : 'A perversion (fetishism)'.

June 9, 1931. Miss Grant Duff : 'Elisabeth and Essex'.

June 16, 1931. Dr. Boehm : 'A case of chronic alcoholism'.

June 27, 1931. *Extraordinary General Meeting*. Before proceeding to the agenda, Dr. Simmel, on behalf of the Society, congratulated Dr. Eitingon on his fiftieth birthday.

A telegram of congratulation was sent to Dr. Boehm on his fiftieth birthday.

In the absence of Dr. Boehm it was resolved to depute Dr. Radó to keep the minutes of the general meeting.

Dr. Radó submitted, on behalf of the committee of revision, a draft, approved by the Council, of the new statutes. Paragraph 13 of the draft was deleted; the remainder was unanimously carried in its entirety.

It was resolved to deal with the subject-matter of the deleted paragraph 13 as part of the business of the day, in exact accordance with its text but in the form of rules meeting the requirements of the official regulations in question.

The report of the Training Committee presented by Dr. Eitingon was carried unanimously.

Upon the motion of the Council the following arrangements to cover the transition to the new statutes were unanimously carried :

(1) The existing Council and all other officers to remain in office until the next General Meeting.

(2) The next General Meeting to take place in October, 1932.

(3) A supplement to the membership subscription for the current year to be paid in January, 1932. This supplement to cover (a) the contribution in respect of the International Psycho-Analytical Association, and (b) the cost of the *Internationale Zeitschrift für Psychoanalyse und Imago*.

Dr. F. Boehm.

#### REPORT OF THE ACTIVITIES OF THE LEIPZIG SUB-SECTION OF THE GERMAN PSYCHO-ANALYTICAL SOCIETY

1930

The Sub-section held weekly meetings this year (except during the summer months, July and August). These meetings consisted in part of

informal discussions taking the place of controls for analyses conducted by some of the members. In part, the meetings were devoted to the consideration of theoretical problems. No visitors were invited to the informal discussions. As there were at least two of these per month, they provided an opportunity for continuous reports of some analyses. To the sessions which dealt with theoretical topics only such visitors were invited as had already engaged in intensive study of psycho-analysis for several terms. The programme of the meetings were as follows :

(1) Metapsychological seminar (begun in 1929).

(2) Discussion of recent publications on the subject of analytical technique.

(3) Theory and technique of the analysis of children, leading to discussion of the problems of anxiety and sublimation.

Our present small circle also from time to time invites a number of people interested in psycho-analysis to a lecture by one of our Berlin colleagues. During 1930 the following lectures were given :

*February 15.* Fenichel : ' Inhibitions '.

*March 8.* Alexander : ' A criminal case considered in the light of psycho-analysis '.

*April 5.* Boehm : ' The femininity complex in men '.

*September 3.* Reik : ' Circumstantial evidence '.

*December 3.* Hárník : ' The sexual development of a girl, reconstructed through the interpretation of childhood dreams in adult analysis '.

Members of the Sub-section have given *résumés* of psycho-analytical topics to interested sections of the public during 1930 :

Frau Dr. Therese Benedek presented an abstract of *Civilization and its Discontents* at the Institute for the History of Medicine in the University of Leipzig, upon the invitation of Professor Siegerist.

Herr Ekman gave the following lectures : *October 25.* ' Psycho-analysis '. (At the Working Men's Educational Union in Gothenburg.) *October 29.* Public Lecture : ' Psycho-analytical aspects of war and peace '. (At the Assembly Hall in Gothenburg.) *October 31.* ' The most common misunderstandings of psycho-analytical theory '. (At the Philosophical Society (Chairman : Professor Malte Jacobson), Gothenburg.)

Herr Ranft lectured at the Institute for Experimental Psychology and Pedagogy of the Leipzig Association of Teachers, upon : ' Anxiety in children ' (on the basis of a statistical investigation of school children). He also reported there on the Dresden Conference of the German Psycho-Analytical Society. In addition, Herr Ranft leads a Study Circle for teachers. In this Study Circle 17 meetings were devoted to Freud's *Die Traumdeutung*, after which Herr Ranft introduced the Circle to the psycho-analytical theory of character and discussed cases, drawn from school practice, of refractoriness to education.

*List of Members of the Leipzig Sub-section*

- (1) Benedek, Dr. med. Therese, Inspector, Leipzig, Brüderstrasse 7, II.
- (2) Ekman, Tore, Lecturer in the Swedish Language at the University of Leipzig, c/o Frau Dr. Benedek.
- (3) Ranft, Hermann, Teacher, Leipzig, Holsteinstrasse 15.
- (4) Vanck, Dr. med. Otto, Nervenheilanstalt, Bergmannswohl, Schkeuditz bei Leipzig.
- (5) Weigel, Dr. med. Herbert, Secretary, Leipzig, Philipp-Rosenthalstrasse 12.

*The Psycho-Analytical Movement in Leipzig*

The Juristic-Medical Society invited Dr. Reik to give a lecture on 'The need for punishment', and he did so on November 2, 1930.

The Central German Radio Corporation arranged a series of six lectures on Depth-Psychology, including one by Dr. Benedek on Parapraxis. The writer also had an opportunity of broadcasting a report of the Conference at Dresden.

Professor Carsum Chang, Professor of Philosophy in China, at present Visiting Professor at Jena, gave a lecture, on the invitation of the German Cultural Union, on 'Chinese philosophy in the light of Psycho-analysis'. At the Institute for the History of Medicine Professor Siegerist arranged, in conjunction with the Central German Branch of the Society for Psychotherapy, a series of six lectures on *Civilization and its Discontents*.

In this series of lectures Professors Wach, Kronfeld, Jolowicz, K. Horney and Professor Driesch expressed their views on the various problems raised by this work of Freud's.

Dr. Benedek.

## HUNGARIAN PSYCHO-ANALYTICAL SOCIETY

*Second Quarter, 1931*

*April 11, 1931.* Frau Dr. Jenny Wälder-Pollak (Vienna): 'Notes on the analysis of a case of *pavor nocturnus*, with special reference to technical procedure'.

*April 24, 1931.* Frau Alice Bálint: Review of Margaret Mead's book, *Coming of Age in Samoa*. Possibility of a future science of comparative pedagogy.

*May 29, 1931.* Dr. Géza Róheim: 'The psychology of a totemistic community'.

*June 5, 1931.* Dr. Géza Róheim: Continuation of the paper of May 29.

*June 26, 1931.* Dr. Sándor Ferenczi: 'Child-Analysis in the Analysis of Adults'.

After a long struggle with the official authorities, permission has been granted for the institution of a Polyclinic to be called *Allgemeines Ambulatorium für Nerven-und Gemütskranke*. The clinic has already begun its



work in suitable premises (I. Meszaros-u. 12). The Society asked Dr. Ferenczi to assume the direction of the Polyclinic, with Dr. M. Bálint as deputy. In addition, the following attend for consultation : Dr. Hermann, Dr. Hollos, Dr. Pfeifer and Dr. Révész. Dr. Almásy devotes the greater part of his time to the Institute as Assistant.

*Changes of Address :* Dr. Endre Almásy, Budapest, I. Meszaros-u. 12 ; Dr. Fanny Hann-Kende, Budapest, V. Zrinyi-u. 14 ; Dr. Imre Hermann, Budapest, II. Filler-u. 25.

Dr. Imre Hermann,  
*Secretary.*

## THE NEW YORK PSYCHO-ANALYTICAL SOCIETY

*Second Quarter, 1931*

*April 28, 1931.* Dr. Gregory Zilboorg : ' Problems in the Pathogenesis of Schizophrenia '. The speaker reviewed Freud's writings on the subject of schizophrenia with particular reference to the analysis of the ' Wolfman ', including the subsequent data appended by Ruth Mack Brunswick, and, appealing to his own experience in the analysis of schizophrenia, postulated the presence of an infantile hysteria in such cases and later attempts at a solution of the Oedipus complex through neurotic constructions. The inadequacy of a neurotic solution finally makes a psychotic solution inevitable.

*May 26, 1931.* Dr. David M. Levy : ' Hypochondria in Childhood '. The paper dealt with the findings in a number of children between the ages of five and puberty. The psychoneurotic elements in these illnesses was described as well as the social background against which the conflicts played.

The Society, working through Committees, is busily engaged in laying the foundations for an Institute, which, it is hoped, will be functioning some time this Autumn.

Bertram D. Lewin,  
*Secretary.*

## SWISS PSYCHO-ANALYTICAL SOCIETY

*Second Quarter, 1931*

*May 2, 1931.* Professor Dr. O. Pfister (Zürich) : (1) ' From the analysis of a Buddhist ' ; (2) ' Hamlet at the chess-board '. (Both papers will appear in *Die psychoanalytische Bewegung*.)

*May 9, 1931.* H. Zulliger (Ittigen) : ' Asafœtida as medicine '. (Appearing in *Die psychoanalytische Bewegung*.)

*June 6 and 7, 1931.* Director Dr. Repond (Malévoz) : ' The Medico-Pedagogical Institute at Malévoz '. A report on the genesis, organization, purpose and aim of the Medico-Pedagogical Institute initiated by Dr.

Repond in Canton Valais and conducted on psycho-analytical principles. Anti-social and criminal juveniles are not only 'dealt with' or punished administratively or judicially; they should be treated. Some successes already obtained.

Frl. G. Guex (Guest of the Society): 'Practical work at the Medico-Pedagogical Institute'. Among the seventy juveniles so far sent to the Institute, examined by physicians conversant with psycho-analysis, and re-educated under their direction, only a small percentage proved neurotic. The majority were cases of neglect. A detailed account was given of a gang of thieves and an anti-social boy and his treatment and cure.

June 27, 1931. (1) Dr. H. Behn-Eschenburg (Zürich): 'F. Hodler's Parallelism'. (Appearing in *Die psychoanalytische Bewegung*.)

(2) *Business Meeting*.

Discussion of the organization of the forthcoming Congress.

Unanimous election of Dr. Eitingon (Berlin) and Dr. Jones (London) as Honorary Members.

July 7, 1931. (1) Dr. H. Schultz (Zürich): 'Analysis of a *chorea minor*'. A woman patient, not analysable to begin with, was gradually changed by pedagogical measures guided by analytical insight, with the help of a change of environment and the homosexual tendencies of the patient, up to a point where she became accessible to analysis.

(2) *Business Meeting*.

*Election of Members*: Frau M. Zulliger (Ittigen), Dr. H. Schultz (Zürich), Dr. H. Nunberg (Lausanne).

Hans Zulliger,  
*Secretary*.

#### VIENNA PSYCHO-ANALYTICAL SOCIETY

*Second Quarter, 1931*

April 15, 1931. Frau Berta Bornstein (Berlin: guest of the Society): 'Phobias and their Treatment in a Child aged two and a half'.

April 29, 1931. Short communications:

(1) Frau Estelle Levy (guest of the Society): 'A moth-phobia'.

(2) Dr. Hitschmann: 'Anxiety about our Nearest and Dearest'.

(3) Frau Dr. Buxbaum: 'Reaction to Examinations in Class'.

May 6, 1931. Meeting to celebrate Professor Freud's seventy-fifth birthday.

An introductory address by Dr. Federn was followed by a paper from Dr. S. Ferenczi (Budapest, guest of the Society), 'Child-analysis in the Analysis of Adults', and a concluding address by Dr. Federn.

May 20, 1931. Short communications:

(1) Dr. Federn: Message of thanks from Professor Freud for the Society's celebration of his seventy-fifth birthday. Congratulations to

Doz Dr. Friedjung on his sixtieth birthday. Announcement of the death of the Society's guest, Dr. Raimund Hofbauer: appreciation of his work.

(2) Dr. Bibring: 'Contribution to the Psychopathology of Sex'.

May 27, 1931. Dr. Oskar Pfister (Zürich, guest of the Society): 'The analysis of a Buddhist'.

June 17, 1931. Short communications:

(1) Dr. Ullrich (Philadelphia, guest of the Society): 'A typical *lapsus calami* in the English language'.

(2) Dr. Federn: 'Examples of the Mechanisms of verbal Wit in Dreams'.

(3) Dr. Bibring: 'A Phantasy of Rescue with a Hostile Meaning'.

(4) Dr. Hitschmann: 'A Neurotic's Speech on a Festal Occasion'.

(5) Dr. Steiner: 'A Psycho-analytical Opinion accepted in a Criminal Case'.

Dr. R. H. Jokl,  
Secretary.

## V. REPORTS OF THE INTERNATIONAL TRAINING COMMISSION

### BERLIN PSYCHO-ANALYTICAL INSTITUTE

FIRST QUARTER, 1931

#### (a) Lecture Courses

1. Sándor Radó: Introduction to Psycho-Analysis. Part II.: General Theory of the Neuroses. (Seven lectures.)
2. Jenő Harnik: Theory of Instincts. (Seven lectures.)
3. Karen Horney: Indications and Technique of analytical Therapy. Part II. (For training candidates only.) (Seven lectures.)

#### (b) Seminars. Practical Exercises. Discussions

4. Hanns Sachs: Seminar on the works of Freud: Case-histories. Part I. (Five seminars of two hours each.)
5. Otto Fenichel: Seminar on the works of Freud: Theoretical works. Part II. (Seven seminars of two hours each.)
6. Siegfried Bernfeld: Seminars on practical questions of psycho-analytical pedagogy. (For advanced students.)
7. Boehm, Harnik and Simmel: Seminars on technique. (For training candidates only.)
8. Eitingon and others: Practical therapeutic exercises. (Control analyses.) (For training candidates only.)
9. Sándor Radó: Discussion of recent publications in psycho-analysis and allied subjects. (Evenings. Four sessions of two hours each.)



*(c) Study Circles*

10. Study Circle for Clinical Cases. (Sándor Radó.)
11. Educational Study Circle. (Müller-Braunschweig, Bernfeld.)
12. Criminological Study Circle. (Staub, Simmel.)

## SECOND QUARTER, 1931

*(a) Lecture Courses*

1. Otto Fenichel: Theory of the specific Neuroses. Part I.: Transference Neuroses and allied topics. (Seven lectures.)
2. Hanns Sachs: Pleasure as an æsthetic problem. (Four lectures.)
3. Sándor Radó: Depressive and manic States in neurosis and cravings. (Four lectures.)
4. Wilhelm Reich: Psychology of Instinct and theory of Character. (Four lectures.)
5. Karen Horney: Some Problems of Feminine Psychology. (Four lectures.)

*(b) Seminars. Practical Exercises. Discussions*

6. Carl Müller-Braunschweig: Seminar on the works of Freud: Case-histories. Part II. (Four seminars of two hours each.)
7. Jenö Harnik: Seminar on the works of Freud: papers on Technique. (Five seminars of two hours each.)
8. Siegfried Bernfeld: Seminars on practical questions of psycho-analytical pedagogy. (For advanced students.)
9. Boehm and Harnik: Seminars on technique. (For training candidates only.)
10. Eitingon and others: Practical therapeutic exercises. (Control analyses.) (For training candidates only.)
11. Ernst Simmel: Problems of clinical psycho-analytical therapy. (Indications, prognosis, modifications of technique.) (For practising analysts.)
12. Sándor Radó: Discussion of recent publications in psycho-analysis and allied subjects. (Evenings. Two sessions of two hours each.)

*(c) Study Circles*

13. Study Circle for Clinical Cases. (Sándor Radó.)
14. Educational Study Circle. (Müller-Braunschweig, Bernfeld.)
15. Criminological Study Circle. (Staub, Simmel.)

## DUTCH PSYCHO-ANALYTICAL INSTITUTE

The following courses of lectures were arranged by the Training Committee during the spring of 1931 and were given in the 'Spinozahuis', at The Hague:

1. Discussions of psycho-analytic therapy. (For Members of the Society and of the ' Leidsche Vereeniging voor Psychoanalyse en Psycho-pathologie ' only.) (Held once a fortnight.) Leader : J. H. W. van Ophuijsen.
2. Dr. H. C. Jelgersma : Psycho-analysis of *dementia senilis*. (For physicians only.) (Two lectures.)
3. J. H. W. van Ophuijsen : Suggestion and Hypnosis in general practice. (For physicians only.) (Five lectures.)
4. J. H. W. van Ophuijsen : Psycho-analysis of Dreams. (Six lectures.)
5. Dr. F. P. Muller : Psycho-analysis of the Neuroses. (Six lectures.)
6. Dr. A. J. Westerman Holstijn : Psycho-analysis of Delusions of injury and persecution. (Five lectures.)
7. J. H. W. van Ophuijsen : Psycho-Analytical reflections on ' difficult ' children. (Five lectures.)

#### TRAINING INSTITUTE OF THE HUNGARIAN PSYCHO-ANALYTICAL SOCIETY

##### FIRST QUARTER, 1931

1. Frau Vilma Kovács : Seminar on technique. (For training candidates only.) (Six lectures.)
2. Frau Dr. Margit Dubovitz : Seminar on the analysis of children. (For practising analysts only.) (Six lectures.)

#### INSTITUTE OF PSYCHO-ANALYSIS, LONDON

##### ANNUAL REPORT OF THE TRAINING COMMITTEE FOR THE YEAR 1930-31

In October, 1930, there were seventeen candidates on the training list, sixteen of whom were actually undergoing training. During the year two candidates were added to the list, one of whom has since resigned. One candidature was withdrawn by agreement ; one other candidate resigned and the training of one other candidate was suspended. In July, 1931, there remained seventeen candidates in training, two of whom are suspended. Three candidates were advanced to the stage of undertaking analysis under control. One has since withdrawn. There are now five on the list of obligatory controls and three on the optional list.

##### *Lecture Courses, etc.*

1. *October-December, 1930.* Miss Searl : Technique of Child-Analysis.
2. *January-April, 1931.* Dr. Payne : Theory of the Neuroses.
3. Seminars on Technique. Monthly. (For controlled candidates.) Conducted by Dr. Glover, Dr. Ernest Jones, Mrs. Klein, Dr. Payne, Mrs. Riviere, Miss Searl and Miss Sharpe.
4. Seminars on Theory. Monthly. (For controlled candidates.) Conducted by Dr. Glover.

5. Control analysis conducted weekly by Dr. Glover, Dr. Ernest Jones, Mrs. Klein, Dr. Payne, Mrs. Riviere, Miss Searl, Miss Sharpe and Mr. Strachey.

Edward Glover,  
*Secretary.*

TRAINING INSTITUTE OF THE VIENNA  
PSYCHO-ANALYTICAL SOCIETY

SECOND QUARTER, 1931

*(a) Seminars*

- Dr. E. Hitschmann : On psycho-analytical therapy.  
Dr. P. Federn : Reading and discussion of Freud's writings. (For beginners.)  
Dr. H. Nunberg : Selected psycho-analytical topics. (For advanced students.)  
Anna Freud : Technique of the analysis of children. (For practising analysts of children.)

*(b) Study Circles*

- Dr. Helene Deutsch : Control-seminars for practising analysts.  
Dr. E. Bibring : On psycho-analytical characterology. (For practising analysts.)  
Dr. Ruth Brunswick : On the study of the psychoses.

*(c) Pedagogy*

- A. Aichhorn : Practical talks in Baby Homes, Crèches, and Orphanages, including discussions of special difficulties.  
Dr. W. Hoffer : Seminar for Educationists.  
Dr. Editha Sterba : Psycho-analytical consultative work in connection with Education.



## VI. LIST OF MEMBERS OF THE INTERNATIONAL PSYCHO-ANALYTICAL ASSOCIATION

### AMERICAN PSYCHO-ANALYTICAL ASSOCIATION

#### *Members*

- Ames, Dr. Thaddeus Hoyt, 55 Park Avenue, New York City.  
Amsden, Dr. George, 136 East 64th Street, New York City.  
Asch, Dr. J. J., 111 East 80th Street, New York City.  
Bartemeier, Dr. Leo, 8—259 General Motors Building, Detroit, Michigan.  
Blitzsten, Dr. Lionel, 104 South Michigan Avenue, Chicago, Illinois.  
Blumgart, Dr. Leonard, 152 West 57th Street, New York City.  
Brill, Dr. A. A., 1 West 70th Street, New York City (*President*).  
Burrow, Dr. Trigant, 67 Park Avenue, New York City.  
Chamberlain, Dr. H. E., Child Guidance Clinic, Minneapolis, Minnesota.  
Chapman, Dr. Ross McClure, Sheppard and Enoch Pratt Hospital, Towson,  
Maryland.  
Clark, Dr. L. Pierce, 2 East 65th Street, New York City.  
Coriat, Dr. J. H., 416 Marlborough Street, Boston, Massachusetts.  
Dannemann-Colomb, Dr. Anna C., 61 Slater Avenue, Providence, Rhode  
Island.  
Dolley, Dr. Lucile, Woburn Apartments, Washington, D. C.  
Emerson, Dr. L. E., 64 Sparks Street, Cambridge, Massachusetts.  
Farnell, Dr. F. J., 598 Angell Street, Providence, Rhode Island.  
Feigenbaum, Dr. Dorian, 60 Gramercy Park, New York City.  
French, Dr. Thomas M., Bloomingdale Hospital, White Plains, New York.  
Glueck, Dr. Bernard, 66 Park Avenue, New York City.  
Graven, Dr. Philip S., 2007 Massachusetts Avenue, N. W., Washington,  
D. C.  
Gregory, Dr. M. S., Medical Arts Building, Oklahoma City, Oklahoma.  
Hadley, Dr. Ernest E., 1835 Eye Street, N. W., Washington, D. C.  
(*Secretary-Treasurer*).  
Haines, Dr. Thomas H., 471 Park Avenue, New York City.  
Hamill, Dr. Ralph, 8 South Michigan Avenue, Chicago, Illinois.  
Hill, Dr. Lewis B., 617 West University Parkway, Baltimore, Maryland.  
Hutchings, Dr. R. H., Utica State Hospital, Utica, New York (*Councillor*).  
Isham, Dr. Mary Keyt, 1406 East McMillan Street, Cincinnati, Ohio.  
Jelliffe, Dr. Smith Ely, 64 West 56th Street, New York City (*Vice-President*).  
Johnson, Dr. Loren B. T., 1900 24th Street, N. W., Washington, D. C.  
Kardiner, Dr. A., 1185 Park Avenue, New York City.  
Kempf, Dr. E. J., Wading River, Long Island, New York.  
Kenworthy, Dr. Marion, 105 East 53rd Street, New York City.  
Lehrman, Dr. Philip, 120 Riverside Drive, New York City.

- Levy, Dr. David, 145 East 57th Street, New York City.  
 Lewin, Bertram D., 55 Fifth Avenue, New York City.  
 Lewis, Dr. Nolan D. C., St. Elizabeth's Hospital, Washington, D. C.  
 Lorand, Dr. Alexander, 115 East 86th Street, Albany, New York.  
 McCord, Dr. Clinton P., 74 Willett Street, Albany, New York.  
 McPherson, Dr. D. J., Peter Bent Brigham Hospital, Boston, Massachusetts.  
 Meyer, Dr. Adolf, Phipps Clinic, Baltimore, Maryland.  
 Meyer, Dr. M. A., 660 Madison Avenue, New York.  
 Menninger, Dr. Karl, The Menninger Clinic, Topeka, Kansas.  
 Oberndorf, Dr. C. P., 112 West 59th Street, New York City.  
 Peck, Dr. Martin W., 520 Commonwealth Avenue, Boston, Massachusetts.  
 Pope, Dr. Curran, 115 West Chestnut Street, Louisville, Kentucky.  
 Powers, Dr. Lillian D., 128 West 59th Street, New York City.  
 Reed, Dr. Ralph, 180 East McMillan Street, Cincinnati, Ohio.  
 Reede, Dr. Edward Hiram, Medical Science Building, Washington, D. C.  
 Saunders, Dr. Eleonora, Sheppard and Enoch Pratt Hospital, Towson, Maryland.  
 Schoenfeld, Dr. Dudley D., 116 West 59th Street, New York City.  
 Silverberg, Dr. William V., 2129 S Street, N. W., Washington, D. C.  
 Singer, Dr. H. D., 30 North Michigan Boulevard, Chicago, Illinois.  
 Smeltz, Dr. George, 121 University Place, Pittsburg, Pennsylvania.  
 Sniffen, Dr. Stewart, 145 East 57th Street, New York City.  
 Stern, Dr. Adolph, 57 West 57th Street, New York City.  
 Stragnell, Dr. Gregory, 320 East 42nd Street, New York City.  
 Stuart, Dr. D. D. V., The Wyoming, Washington, D. C.  
 Sullivan, Dr. Harry Stack, 60 East 42nd Street, New York City (*Councillor*).  
 Syz, Dr. Hans C., 67 Park Avenue, New York City.  
 Taneyhill, Dr. G. Lane, Medical Arts Building, Baltimore, Maryland.  
 Thompson, Dr. Clara M., 2025 Eutaw Place, Baltimore, Maryland.  
 Thompson, Dr. J. C., 1230 Washington Street, San Francisco, California.  
 Walker, Dr. W. K., Phoenixville, Chester County, Pennsylvania.  
 White, Dr. William A., St. Elizabeth's Hospital, Washington, D. C. (*Councillor*).  
 Wholey, Dr. C. C., 121 University Place, Pittsburg, Pennsylvania.  
 Williams, Dr. Frankwood, 370 Seventh Avenue, New York City.  
 Young, Dr. G. A., Medical Arts Building, Omaha, Nebraska.  
 Zilboorg, Dr. Gregory, Bloomingdale Hospital, White Plains, New York.

*Associate Member*

- Lasswell, Dr. Harold, University of Chicago, Illinois.

*Honorary Members*

- Ferenczi, Dr. Sandor, Budapest.  
 Freud, Prof. Dr. Sigm., Vienna.

## BRITISH PSYCHO-ANALYTICAL SOCIETY

*Members*

- Dr. Marjorie Brierley, 11 Nottingham Place, London, W. 1.  
 Dr. Douglas Bryan, 35 Queen Anne Street, London, W. 1 (*Treasurer*).  
 Mr. Cyril Burt, 30 Princess Road, Regent's Park, London, N.W. 1.  
 Dr. M. D. Eder, 16 Nottingham Place, London, W. 1.  
 Prof. J. C. Flugel, 11 Albert Road, Regent's Park, London, N.W. 1.  
 Dr. D. Forsyth, 21 Wimpole Street, London, W. 1.  
 Dr. Marjorie E. Franklin, 86 Harley Street, London, W. 1.  
 Dr. E. Glover, 18 Wimpole Street, London, W. 1 (*Director of Scientific Research*).  
 Mrs. Susan Isaacs, 54 Regent's Park Road, London, N.W. 1.  
 Dr. Ernest Jones, 81 Harley Street, London, W. 1 (*President*).  
 Mrs. Melanie Klein, 93c Linden Gardens, London, W. 2.  
 Miss Barbara Low, 13 Guilford Street, London, W.C. 1.  
 Dr. T. W. Mitchell, Hadlow, Kent.  
 Dr. Sylvia Payne, 143 Harley Street, London, W. 1 (*Secretary*).  
 Dr. John Rickman, 11 Kent Terrace, London, N.W. 1.  
 Dr. R. M. Riggall, 40 Upper George Street, London, W. 1.  
 Mrs. Joan Riviere, 3 Stanhope Terrace, Lancaster Gate, London, W. 2.  
 Miss N. Searl, 9 Kent Terrace, Regent's Park, London, N.W. 1.  
 Miss E. Sharpe, 9 Kent Terrace, Regent's Park, London, N.W. 1.  
 Dr. Adrian Stephen, 140 Harley Street, London, W. 1.  
 Dr. Karin Stephen, 140 Harley Street, London, W. 1.  
 Dr. W. H. B. Stoddart, Harcourt House, Cavendish Square, London, W. 1.  
 Mr. James Strachey, 41 Gordon Square, London, W.C. 1.  
 Mrs. James Strachey, 41 Gordon Square, London, W.C. 1.  
 Prof. A. G. Tansley, Grantchester, Cambridge.  
 Dr. H. Torrance Thomson, 13 Lansdowne Crescent, Edinburgh.  
 Dr. E. Vaughan-Sawyer, 131 Harley Street, London, W. 1.  
 Dr. A. C. Wilson, 5 Devonshire Place, London, W. 1.  
 Dr. Maurice Wright, 86 Brook Street, London, W. 1.  
 Dr. Sybille Yates, 11 Nottingham Place, London, W. 1.

*Associate Members*

- Miss Cecil M. Baines, 79 Fitzjohns Avenue, Hampstead, London, N.W. 3.  
 Dr. Mary Barkas, The Lawn, Lincoln.  
 Dr. W. H. Brend, 14 Bolingbroke Grove, Wandsworth Common, London, S.W.  
 Dr. Josephine Brown, London, 17 Mount Carmel Chambers, Dukes Lane, W. 8.  
 Miss Mary Chadwick, 48 Tavistock Square, London, W.C. 1.  
 Dr. M. Culpin, 1 Queen Anne Street, London, W. 1.



- Dr. W. Eddison, Wonford House, Exeter.  
 Dr. Fairbairn, 18 Lansdowne Crescent, Edinburgh.  
 Rev. P. Gough, The Rectory, Acton, London, W. 3.  
 Miss I. A. Grant Duff, Berlin-Charlottenburg 2, Niebuhrstrasse 78 bei Mottek.  
 Dr. Bernard Hart, 94 Harley Street, London, W. 1.  
 Dr. S. Herbert, 448 Barlow Moor Road, Chorlton-cum-Hardy, Manchester.  
 Dr. M. B. Herford, 19 Redlands Road, Reading.  
 Dr. W. Inman, 22 Clarendon Road, Southsea, Hants.  
 Mr. R. O. Kapp, 25 Randolph Crescent, London, W. 9.  
 Dr. J. Strafford Lewis, Colney Hatch Mental Hospital, New Southgate, London, N. 11.  
 Miss M. G. Lewis, 16 Gordon Street, London, W.C. 1.  
 Mr. R. Money-Kyrle, Whetham, Calne, Wilts.  
 Sir Percy Nunn, London Day Training College, Southampton Row, London, W.C. 1.  
 Dr. G. W. Pailthorpe, 71 Harley Street, London, W. 1.  
 Dr. L. S. Penrose, 35 Lexden Road, Colchester.  
 Miss Sheehan-Dare, 39E Linden Gardens, London, W. 2.  
 Dr. Rees Thomas, Greyridges, Retford, Notts.  
 Dr. F. R. Winton, Department of Physiology, University College, Gower Street, London, W.C. 1.

*Honorary Members*

- Dr. M. Eitingon, Berlin.  
 Dr. S. Ferenczi, Budapest.

DUTCH PSYCHO-ANALYTICAL SOCIETY

- Dr. A. M. Blok, Haag, Wassenaarsche weg 39.  
 Prof. Dr. K. H. Bouman, Amsterdam, Jan Luykenstraat 24 (*Librarian*).  
 Dr. J. E. G. van Emden, Haag, Sweelinckplein 49.  
 Dr. A. Endtz, Loosduinen, "Oud-Rosenburg" (*Secretary*).  
 Dr. M. Flohil, Loosduinen, "Oud-Rosenburg."  
 Dr. J. H. van der Hoop, Amsterdam, Roemer Visscherstraat 19.  
 Prof. Dr. G. Jelgersma, Oegstgeest, Nassaulaan 32.  
 Dr. H. C. Jelgersma, Oegstgeest, "Endegeest."  
 Dr. M. Katan, Oegstgeest, Wilhelminapark 16.  
 Dr. B. D. J. van de Linde, Hilversum, Boomberglaan 4.  
 Dr. S. J. R. de Monchy, Rotterdam, Schiedamsche Singel 235.  
 Dr. F. Muller, Haarlem, Julianstraat 8.  
 Dr. F. P. Muller, Leiden, Rijsburgerweg 102 (*Treasurer*).  
 Dr. J. H. W. van Ophuijsen, Haag, Prinsevinkenpark 5 (*President*).  
 Dr. H. C. Rümke, Amsterdam, Albrecht Dürerstraat 6.  
 Dr. Th. van Schelven, Haag, Carel van Bylandtlaan 11.

- Dr. A. Stärcke, Den Dolder, " Willem Arntszhoeve."  
 Dr. P. H. Versteeg, Haag, Javastraat 3.  
 Dr. C. M. Versteeg-Solleveld, Haag, Javastraat 3.  
 Dr. S. Weijl, Rotterdam, s'Gravendijkwal 98.  
 Dr. A. J. Westerman Holstijn, Amsterdam, Valeriusstraat 113.

## FRENCH PSYCHO-ANALYTICAL SOCIETY

*Members*

- Dr. René Allendy, Paris XVI, 67 rue de l'Assomption (*Secretary*).  
 Marie Bonaparte, Princesse Georges de Grèce, Paris XVI, 6 rue Adolphe Yvon.  
 Dr. A. Borel, Paris IV, Quai aux fleurs 11.  
 Dr. Michel Cénac, Paris VI, 3 rue Coëtlogon.  
 Dr. H. Codet, Paris V, 10 rue de l'Odéon (*Vice-President*).  
 Dr. Henry Flournoy, Genève (Suisse), 6 rue de Monnetier.  
 Prof. A. Hesnard, Toulon, 4 rue Peirex.  
 Dr. R. Laforgue, Paris XVI, 1 rue Mignet.  
 Dr. R. Löwenstein, Paris XVI, Avenue de Versailles 127.  
 Dr. Sophie Morgenstern, Paris XVI, 4 rue de Cure.  
 Dr. Sascha Nacht, Paris XVI, 21 Boulevard Flandrin (*Treasurer*).  
 Dr. Ch. Odier, Paris XVI, Boul. Montmorency 79.  
 Mme. Ilse Odier, Paris XVI, Boul. Montmorency 79.  
 Dr. G. Parcheminey, Paris XVII, 92 Avenue Niel (*President*).  
 Dr. E. Pichon, Paris IX, 23 rue du Rocher.  
 Mme. Reverchon-Jouve, Paris VII, 9 bis, rue Pérignon.  
 Dr. R. de Saussure, Genève, 2 Tertasse.  
 Mlle. E. Sokolnicka, Paris VII, 30 rue Chevert.  
 Dr. Paul Schiff, Paris XIV, 14 rue César Franck.

*Associate Members*

- Prof. Dr. Beltram, Echeveria 1601, Buenos Ayres.  
 Dr. Anne Berman, Paris VIII, rue Miromesnil 58.  
 Bernard Doreau, 31 rue de Bellechasse, Paris VII.  
 M. Frois-Wittman, Paris V, 27 rue Lhomond.  
 Paul Germain, 10 rue Durantin, Paris XVIII.  
 Dr. Hélot, 30, rue Duc de Cars., Alger, Algérie.  
 Dr. Henri Hoesli, 90 rue du Bac, Paris VII.  
 Mme. René Laforgue, 1 rue Mignet, Paris XVI.  
 Dr. John Leuba, 121 rue de Vanves, Paris XIV.  
 Dr. Maurice Martin-Sisteron, 14 Boulevard Edouard Rey, Grenoble (Isère).  
 Dr. Allende Novaro, Santiago de Chili, Calle Moreda, 1944.  
 Dr. A. Répond, Maison de Santé, Malévoz, Monthey (Valais, Suisse).  
 Dr. Ettore Rieti, Istituto Psichiatrico di Grugliasco. Torino.

## GERMAN PSYCHO-ANALYTICAL SOCIETY

*Members*

- Alexander, Dr. Franz, c/o Judge Baker Foundation, 40 Courts Street, Boston.
- Bally, Dr. Gustav, Berlin-Wilmersdorf, Paulsbornerstr. 87.
- Benedek, Dr. Therese, Leipzig, Bruderstrasse 7/II, 1.
- Bernfeld, Dr. Siegfried, Berlin-Charlottenburg, Schillerstrasse 2.
- Boehm, Dr. Felix, Berlin 20. N.W. 87, Lessingstr. 1/I.
- Cohn, Dr. Franz, Berlin-Wilmersdorf, Helmstädter Str. 22.
- Eitingon, Dr. Max, Berlin-Dahlem, Altensteinstrasse 26. (*President. Director of the Institute.*)
- Fenichel, Dr. Otto, Berlin W. 50, Nürnberger Platz 6.
- Fromm-Reichmann, Dr. Frieda, Heidelberg-Neuenheim, Mönchhofstrasse 15.
- Groddeck, Dr. Georg, Baden-Baden, Werderstrasse 14.
- Gross, Dr. Alfred, Berlin-Halensee, Küstriner Str. 4.
- Haas, Dr. Erich, Köln, Hohenzollernring 37.
- Happel, Dr. Clara, Hamburg 21, Marienerrasse 17.
- Hárník, Dr. Jenó, Berlin-Wilmersdorf, Pommersche Str. 5.
- Horney, Dr. Karen, Berlin W. 62, Lützowufer 38.
- Jacobsohn, Dr. Edith, Berlin W. 15, Emserstrasse 39/d.
- Kempner, Dr. Salomea, Berlin-Wilmersdorf, Güntzelstrasse 13.
- Kraft, Dr. Erich, Berlin W. 10, Genthiner Str. 7.
- Lampl, Dr. Hans, Berlin-Dahlem, Schumacherplatz 2.
- Lampl-de Groot, Dr. A., Berlin-Dahlem, Schumacherplatz 2.
- Landauer, Dr. Karl, Frankfurt a. M., Kettenhofweg 17.
- Lantos, Dr. Barbara, Berlin-Schöneberg, Innsbrucker Str. 28.
- Liebeck-Kirschner, Dr. Lotte, Berlin W. 9, Königin-Augusta-Str. 7.
- Lowtzky, Dr. F., Berlin-Wilmersdorf, Nassauische Str. 54/55.
- Meng, Dr. Heinrich, Frankfurt a. M., Marienstr. 15.
- Müller-Braunschweig, Ada, Berlin-Schmargendorf, Sulzaer Strasse 3.
- Müller-Braunschweig, Dr. Carl, Berlin-Schmargendorf, Sulzaer Strasse 3.
- Naef, Dr. Elisabeth, Berlin-Steglitz, Opitzstrasse 4.
- Radó, Dr. Sándor, 12 East 86th Str., New York City.
- Reik, Dr. Theodor, Berlin-Schmargendorf, Reichenhaller Str. 1.
- Sachs, Dr. Hanns, Berlin-Charlottenburg, Mommsenstrasse 7.
- Schalit, Dr. Ilja, Berlin W. 15, Pariserstr. 39/40.
- Schultz-Hencke, Dr. Harald, Berlin-Wilmersdorf, Hohenzollerndamm 26.
- Simmel, Dr. Ernst, Berlin-Westend, Eichenallee 23.
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